DOCUMENT RESUME

ED 426 773 PS 027 229

| | |
|---|---|
| AUTHOR | Porter, Toni; Rice, Rena |
| TITLE | Walking the Talk: A Study of Training in Five National Family Support Programs. |
| INSTITUTION | Bank Street Coll. of Education, New York, NY. Center for Family Support. |
| PUB DATE | 1995-08-00 |
| NOTE | 88p. |
| PUB TYPE | Reports - Research (143) |
| EDRS PRICE | MF01/PC04 Plus Postage. |
| DESCRIPTORS | Case Studies; Early Intervention; *Family Programs; Interviews; Parent Child Relationship; *Parent Education; Parenting Skills; Parents as Teachers; Program Descriptions; *Training Methods; *Training Objectives |
| IDENTIFIERS | Avance San Antonio Inc; Family Support; Home Instruction Program Preschool Youngsters; Minnesota Early Learning Design; Parent Services Project CA; Parents as Teachers Birth to Three; *Program Characteristics |

ABSTRACT

Although family support programs vary in program goals and service delivery, their common features constitute an approach for working with families. The purpose of this study was twofold: (1) to gather basic information about how programs prepare their staff to use the family support approach and to identify commonalities and differences in their training; and (2) to create a framework to analyze training for family support in general. Methods for the study included selecting programs for case studies, collecting data from the training materials, interviewing program directors and training staff, and creating a framework for comparing the training. Training manuals were obtained from the selected programs: Parent Services Project, Minnesota Early Learning Design Program for Young Moms, Avance, Parents as Teachers Birth to Three, and the Home Instruction Program for Preschool Youngsters. Findings came under several areas: (1) program description, including training goals and trainees' characteristics; (2) program philosophy; (3) program goals, including the explicitness of goal statements, intended populations, and consistency; (4) training curriculum content, including topics covered, information on content, process, and procedure, and the balance and consistency of content; (5) training process, including consistency with adult learning principles, teaching strategies, duration and number of training sessions, setting, and group size; (6) design of materials, including organization and text accuracy; and (7) acknowledgment of cultural diversity, including explicitness of recognition, customs and traditions, language, parenting styles, gender, and socioeconomic status. (Two appendices list the family support training curricula and profile the family support programs. Contains 10 references.) (Author/KB)

**********
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
**********

ED 426 773

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
X This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

# Walking the Talk:

## A Study of Training in Five National Family Support Programs

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY
Toni Porter
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
1

Toni Porter

Rena Rice

Center for Family Support
Division of Continuing Education
Bank Street College of Education
610 West 112th Street
New York, NY 10025

PS027229

BEST COPY AVAILABLE

# *Walking the Talk:*

## A Study of Training in Five National Family Support Programs

Toni Porter

Rena Rice

© Center for Family Support
Division of Continuing Education
Bank Street College of Education
610 West 112th Street
New York, NY 10025

August, 1995

BEST COPY AVAILABLE

BEST COPY AVAILABLE

## Table of Contents


Acknowledgments . . . . . 1

Introduction . . . . . 2

Purpose of the Study . . . . . 4

Methodology . . . . . 5

- Program Selection . . . . . 5
- Data Collection . . . . . 6
- Interviews with Program Staff . . . . . 7
- Analysis . . . . . 7

Program Descriptions . . . . . 7

- Training Goals and Philosophy . . . . . 9
- Characteristics of the Trainees . . . . . 12
- The Training Materials . . . . . 12

Program Philosophy . . . . . 13

Program Goals . . . . . 17

- Explicit Goal Statement . . . . . 18
- Population . . . . . 20
- Goals for Individual Adults . . . . . 21
- Goals for Children . . . . . 22
- Goals for Parents . . . . . 24
- Consistency . . . . . 25

Training Curriculum Content . . . . . 25

- List of Topics . . . . . 26
- Content Information . . . . . 26
- Process Information . . . . . 26
- Procedure Information . . . . . 28
- Balance . . . . . 29

Consistency . . . . . 30
Training Process . . . . . 30
Consistency with Adult Learning Principles . . . . . 31
Teaching Strategies . . . . . 33
Duration and Number of Trainings . . . . . 34
Setting . . . . . 36
Group Size . . . . . 36
Design of the Curriculum Materials . . . . . 36
Organization . . . . . 37
Format and Typography . . . . . 39
Use of Graphics . . . . . 39
Accuracy in Text . . . . . 39
Acknowledgment of Cultural Diversity . . . . . 40
Explicit Recognition of Cultural Diversity . . . . . 40
Customs, Traditions, and Ethnicity . . . . . 40
Language . . . . . 42
Parenting Styles . . . . . 42
Gender . . . . . 42
Socioeconomic Status . . . . . 43
Semantics . . . . . 44
Discussion . . . . . 47
What Are the Commonalities in the Training Materials and the Training? . . . . . 48
What Are the Differences in the Training Materials and the Training? . . . . . 49
What Issues Do These Finding Raise About Training by Individual Programs? . . . . . 50
What Lessons Can Be Learned From These Programs About Preparing Staff to Use the Family Support Approach? . . . . . 52

Appendix A . . . . . 56
Appendix B . . . . . 57
References . . . . . 73

## List of Tables

Table 1: Historical Profiles . . . . . 8
Table 2: Current Information . . . . . 10
Table 3: Program Philosophy . . . . . 15
Table 4: Training Curricula Explicit Goal Statements . . . . . 19
Table 5: Training Curricula Table of Contents . . . . . 27
Table 6: Training Structure . . . . . 35
Table 7: Training Curriculum Design . . . . . 38

**Acknowledgments**

When we began this study, we knew that it would be challenging because we were breaking new ground. Our Advisory Committee played a vital role in our work. We are especially grateful to Judy Carter, Sharon Lynn Kagan, Mary Larner, Shelby Miller, Douglas Powell, and Francie Zimmerman for their consistent support and thoughtful advice.

The executive directors and senior staff of the programs we examined also made an enormous contribution to our work. Ethel Seiderman and Lisa Lee of the Parents Services Project; Ann Ellwood, Mary Kay Stranik, and Joyce Hoelting of MELD; Mildred Winter, Sue Sheehan, and Sharon Rhodes of Parents as Teachers; and Miriam Westheimer and Wanda Roundtree of the Home Instruction Program for Preschool Youngsters were eager to share information about their programs and readily available for interviews and meetings. They were enthusiastic about the research, concerned about its implications, and generous with their thoughts and advice. We also want to acknowledge the contribution of Gloria Rodriguez of Avance, who attended the final meeting to discuss the research.

A special thanks is due to Luba Lynch and Vickie Frelow of the A.L. Mailman Family Foundation. Their vision for the study and their support throughout our work sustained us when we encountered unexpected challenges.

Zoë Rice joined us for two summers during this project. We are grateful for her careful research, her thorough editing, and her excellent computer skills.

## Introduction

In 1992, Congress appropriated funds for three states--Connecticut, Maryland, and Virginia--to develop family support programs. A year later, it passed new legislation that provided $1.1 billion over a five-year period for the creation of local family support and family preservation programs across the country. First-year funding was designed to support state planning efforts; funding for the subsequent years was to be used for the implementation of community-based services.

What is family support? There are literally hundreds of programs across the country that identify themselves with this label. Some are small grass-roots efforts in neighborhoods or communities. Others are large, well-established programs that have been replicated in several cities or states. In 1994, the Family Resource Coalition, the national organization for family support, reported a membership of more than 2000 family support organizations.

Family support programs do not conform to any single service delivery model. Some rely on home visits with families. Others use sites located in the community--family resource centers, schools, day care programs or hospitals--as a base for working with families. The kinds of services that programs offer vary widely. They can include parenting education, peer support groups, individual counseling, information and referral, adult education, early childhood and youth activities, health screening, and organized family events.

Program goals are as diverse as their models. Some programs are designed to reduce child abuse and neglect. Others intend to promote school readiness. Still others aim to enhance self-sufficiency among families who are dependent on public assistance or to increase family literacy.

It is clear that family support applies to a broad range of programs that share some elements in common. Family support programs are intended to work with the whole family--adults, children, and youth--unlike other human service programs that may concentrate on a single family member. Family support programs focus on family strengths: they aim to help families identify their own goals and develop their own plans for achieving them. Staff-participant

relationships are characterized by mutual respect and equality; participants play a significant role in program planning and implementation. Programs are community-based, flexible, and responsive to cultural differences. Participation is voluntary.

Together, these features constitute an approach for working with families. This approach differs from traditional social service methods that are often characterized by a deficit model that aims to remedy perceived family weaknesses, perpetuates expert-client relationships, and mandates participation in activities that are determined by the program staff.

The notion of family support as an approach rather than a constellation of services will create several challenges for policymakers as they seek to use the new federal family support funding. One set of issues will be related to the public policy objectives that states aim to achieve. The federal legislation delineates some very general goals. One is to increase the strength and stability of families. Another is to increase parents' confidence in their parenting roles. The others consist of enhancing stable family environments and supporting child development (U.S. Department of Health and Human Services, Administration for Children and Families, 1994). Clearly, these goals can encompass a wide variety of outcomes that can be achieved through a broad range of strategies. States will face the choice of identifying those outcomes and strategies that best meet their policy needs.

Another set of issues for state policymakers will be related to program implementation. Compared to other services, such as early childhood education or child welfare, family support is a relatively young field. Although its roots extend back to the settlement house movement of the 1890's, the current generation of programs is approximately two decades old. As a result, there is not a large body of evidence on program effectiveness.

This situation may create some difficulties for state policymakers. While there is some consensus in the field about the principles that underlie family support, there is as yet no strong agreement about what constitutes effective programs. Because there are no widely accepted definitions of program effectiveness, the field has not yet developed standards that reflect effective practices, although it is in the process of doing so. As a result, policymakers may have to be creative about developing guidelines for program structure and design.

One of the other issues that state policymakers and local programs face will be how to prepare staff to offer family support services. This issue of staff training is important, if the experience of other fields is any indication. Research on early childhood services, for example, points to a trained staff as a significant factor in program quality. There is, however, no single source of information about the training in family support programs. As a result, policymakers have to turn to individual programs to learn about the training that each offers, which may make it difficult to compare different training systems or to assess their appropriateness for local circumstances.

This situation is complicated by the fact that the field has not reached a consensus about the kinds of competencies that undergird family support. What kinds of skills and knowledge do staff need to implement this approach? How can staff be prepared to establish mutually respectful relationships with families? To support child and adult development? To honor cultural differences?

## Purpose of the Study

We sought to answer these questions in a study of training offered by a small number of family support programs. The purpose of the study was twofold. First, we aimed to gather some basic data about how programs prepare their staff to use the family support approach and to compare the commonalities and differences in the training that they offered. Second, we sought to create a framework to analyze training for family support in general.

We believed that our study would be useful for several reasons. For one, it would expand the knowledge base about training offered by several programs and, as a result, it would provide valuable information to policymakers who were interested in those systems. Equally important, the framework would serve as a guide to help individuals select training programs to meet their needs.

Most of the family support training that is currently available is offered in the context of preparing staff to implement specific program models. There is, however, growing interest in the notion of preservice and inservice preparation that focuses on family support principles in

general. We hoped that our study would provide some insights into future directions for training by institutions of higher education.

Finally, we believed that the study would point to some of the challenges that the field currently faces in meeting the demand for trained staff. We hoped that a comparison of programs would raise questions regarding such difficult issues as how to meet the needs of prospective staff with different backgrounds and how to expand the availability of training.

## Methodology

The initial methodology for our study was simple and straightforward. It consisted of four primary components. First we intended to select a set of programs for case studies. Then we planned to collect data from the training materials. To supplement these data, we intended to interview program directors and their training staff. Finally, we planned to create a framework for comparing the training.

### *Program Selection*

We turned to a group of family support experts for advice on selecting the programs for the study. Our initial criteria were fairly broad. We sought to identify six to eight programs that had developed systematic preservice training for staff. Because one of our objectives was to analyze the common characteristics of the training, the principal prerequisite for inclusion was a set of written materials.

The other criterion for selection was related to the size of the program, since we sought to capture some of the diversity in the field. Within the set of six programs, we intended to examine several small programs that focused on single neighborhoods or communities, several mid-size programs that were statewide in focus, and several large programs with a national presence.

This approach proved to be difficult to implement since there was no comprehensive data base on the availability of family support training. As a result, we shifted the focus of our work. We decided to look at a group of programs that are considered leaders in the field. This shift in focus enabled us to refine the criteria for selection. In addition to the availability of written

materials, we developed two other criteria: program replication and the existence of an evaluation. We believed that replication was important because it indicated that the program had experience in preparing staff in several sites to offer services. Evaluation was important because it provided evidence of the programs' effectiveness, which might, in turn, be related to the training for staff.

A relatively large group of programs met these criteria. With the help of our advisory committee, we selected five for the study. They included the Parent Services Project (PSP), the Minnesota Early Learning Design Program (MELD) for Young Moms (MYM), Avance, Parents as Teachers (PAT) Birth to Three, and the Home Instruction Program for Preschool Youngsters (HIPPY). Each of the programs agreed to participate in the research and sent us their training manuals.

***Data Collection***

Our second task consisted of collecting and organizing data from the written training materials. Because the research literature on training in family support was sparse, we looked at studies on training in other fields for categories that could be applied to the analysis. Work that had been conducted in three areas seemed to be most relevant to our purpose. The first area consisted of Cochran's (1988, 1994) work on empowerment, which explored issues related to the notion of operationalizing principles that have become associated with family support. The second area was Powell's (1993) work on parent education programs, particularly his analyses of the differences in program goals and intervention strategies. The third area was Modigliani's (1991) work on programs that prepare individuals to offer family child care services.

From this research, we extrapolated seven general categories for our analysis: philosophy, goals, training curriculum content, training curriculum design, process, acknowledgment of cultural differences, and semantics. For each of these categories, we developed a series of characteristics to compare commonalities and differences.

*Interviews With Program Staff*

Since written materials may provide an incomplete picture of training, we developed a protocol for interviewing program staff. The interview focused on several issues, such as training structure, philosophy and development of the training, and characteristics of the trainees. In addition, the interview included questions about the training process. We used the protocol in phone interviews with the executive directors and senior training staff from four of the programs. The data were used to amplify the picture of the training that programs offered to new staff.

*Analysis*

The initial task in the analysis consisted of arraying the data from the training materials in a matrix of the characteristics that we had developed. These charts enabled us to examine the similarities and differences in the ways that programs addressed the broad range of issues related to preparing their staff to offer family support services.

Individually, each of the programs reviewed the charts to ensure that the data accurately reflected their program materials. We met twice as a group to discuss the initial findings. The meetings raised several important questions about the implications of this research and its potential impact on the field.

## Program Descriptions

PSP, MELD, Avance, PAT, and HIPPY represent some of the flagship programs in the field. Each has been operating for over a decade: two programs were created in the 1970's and the remainder in the early 1980's (Table 1). All offer services at multiple sites: one within its own state, two in other states, and two across the nation as well as in other countries. The programs have been evaluated with positive results. Each identifies itself as a family support program, although, in recent years, HIPPY has identified itself more closely with parent education than family support.

## Table 1

### Historical Profiles

| | PSP | MELD | AVANCE | PAT | HIPPY |
|---|---|---|---|---|---|
| Year Founded: | • 1980 | • Pilot: 1975 - 1978<br>• 1974 | • 1972, Dallas<br>• 1973, San Antonio | • Pilot: 1981<br>• NPAT: 1982 | • Israel: 1969<br>• USA: 1984 |
| Initial Location: | • San Francisco Bay Area, California | • Minneapolis, Minnesota | • Dallas, Texas<br>• San Antonio, TX | • Missouri | • Jerusalem, Israel<br>• Tulsa, Oklahoma |
| Founder: | • Zellerbach Family Fund and Ethel Seiderman | • Ann Ellwood | • Conceptualized by Cornell graduate students under Dr. Urie Bronfenbrenner<br>• Zale Foundation | • Mildred Winter; based on Burton White's parent education model | • Dr. Avima Lombard |
| Current Director: | • Ethel Seiderman | • Ann Ellwood | • Gloria Rodriguez | • Mildred Winter | • Miriam Westheimer |
| # of People Served Initially: | • 4 sites in 3 counties served 400 people | • 89 parents in 5 parent groups (pilot) | • 35 parents | • 380 families (NPAT pilot) | • Israel: 140 people<br>• USA: 1 HIPPY program |
| Initial Funding: | • Zellerbach Family Fund<br>• San Francisco Foundation (Beryl Buck Trust) | • Lilly Endowment, Inc.<br>• Bush, Mardag, & Ripley Foundations | • Zale Foundation | • Missouri's State Department of Education; 4 local school districts<br>• Danforth Foundation | • National Council of Jewish Women (NCJW) and other private foundations<br>• Local school districts |

As we note later in our discussion, the five programs tend to fall into two different service modalities. PSP, MELD, and Avance offer services that are predominately site-based. PSP works in child care centers, MELD in community settings such as churches, and Avance in its own facilities. PAT and HIPPY use a home visiting model that is supplemented by group meetings.

Program size varies significantly. Of the five, MELD is the smallest with approximately 5000 families who are annually served in more than 70 programs (Table 2). Avance ranks next in size with a total of approximately 5,500 families who are served in its three sites in San Antonio, Houston, and the Rio Grande Valley. The other three programs serve significantly larger numbers of families. PSP offers services to approximately 15,000 families with 300 programs in five states. The number of families in HIPPY's programs in 23 states totaled more than 11,000 in 1994. In the same year, close to 214,000 families participated in PAT: 124,000 families in Missouri and approximately 90,000 in programs in 43 other states.

The unit cost varies across programs. It ranges from $400 per family in PSP to $1000 per family in HIPPY. PAT and Avance fall midway between the two with $550 per family for PAT and an estimated $660 for Avance. No data on unit cost were available for MELD. All of the programs rely on a combination of public and private funding. Public funding consists of a mix of federal, state, and local sources, including federal funds for Head Start and Even Start, as well as state education funds. For the most part, private funding is obtained from foundations. Appendix B contains a complete profile of each program.

***Training Goals and Philosophy***

The principal training goal for all five programs is to facilitate the implementation of their models. Each of the programs views the training as an analogue for its own approach. The intent of the training is to model the program philosophy and strategies for working with families. Trainers are supposed to use the same techniques with the prospective staff that the staff are then expected to use with the families they serve.

## Table 2

### Current Information

| | PSP | MELD | AVANCE | PAT | HIPPY |
|---|---|---|---|---|---|
| # of People Served Currently: | • 300 programs serve 15,000 families<br><br>• Other programs in four states<br><br>• 8 sites in the San Francisco Bay Area | • 70 programs serve 5,000 families | • Approximately 5,500 families served annually<br><br>• **San Antonio**: 7 centers, 9 schools, and 8 workshop sites; **Houston**: 1 center, 5 schools, 3 mobile centers; **Rio Grande Valley Area**: new chapter | • Over 1,450 programs in 44 states<br><br>• 1992-93: 536 school districts in Missouri served 124,210 families | • 83 sites in 23 states serve over 11,000 families<br><br>• **Arkansas**: over 30 sites serve 5,110 children and their parents (1993) |
| Target Population | • African American, Latino, Chinese, Southeast Asian, Caucasian, Haitian, Ethiopian, and other new immigrant groups<br><br>• Low- and moderate-income families. | • Young mothers (MYM) | • Mostly Mexican American families living in or near federally funded housing projects<br><br>• Low-income (approximately $6,840 annually)<br><br>• Families with children under 4 | • Parents of all ages, educational levels, and income levels<br><br>• Families have children from birth to three years of age | • Families in low-income areas. Parents usually have no high school diploma<br><br>• Families have children who are four- or five-years old and who are not in kindergarten |

## Table 2

### Current Information

| Continued | PSP | MELD | AVANCE | PAT | HIPPY |
|---|---|---|---|---|---|
| Current Funding | • 1988: PSP incorporated to provide training, disseminate information on the model, and to affect public and institutional policies<br><br>• All of the original San Francisco Bay Area sites rely on private funds<br><br>• Nationwide, programs use private and public funds, including Head Start | • Carnegie Corporation of New York for MYM in 1978<br><br>• Other private and public funds | • Sources: 30% Federal Govt., 20% private foundations, 16% contracted services, 10% local govt., 7% United Way, 6% fundraising events, 3% corporate donations, 1% certified programs<br><br>• Private and public funds | • Missouri: primarily by State Department of Education, supplemented with local school district dollars<br><br>• Nationally, a mix of private and public funding (Head Start, Even Start) | • Nationally, federal funds including chapter I funds, Even Start, and the Job Training Partnership Act<br><br>• Arkansas: the Arkansas Better Chance Bill |
| Unit Cost | • $350 - $400 per family annually | | • Approximately $660 per family annually | • $580 per family annually | • $1000 per family annually |

*Characteristics of the Trainees*

The programs use different systems for preparing staff to deliver services. MELD and HIPPY use the equivalent of a train-the-trainer approach. National staff train the individuals who will coordinate the program at local sites. The coordinators then train the individuals who will offer direct services.

Both HIPPY and MELD expect coordinators to have college degrees. HIPPY expects coordinators to have a degree in early childhood or a related field, but MELD does not indicate a preference for individuals with academic preparation in particular disciplines. Expectations for the educational background of front-line staff are different. MELD anticipates that its volunteer parent group facilitators will have a wide range of educational backgrounds. HIPPY, by contrast, deliberately recruits paraprofessionals who do not have a college education in order to offer training and employment opportunities to members of the community.

Avance, PSP, and PAT use a different system. Instead of two-tier training, they train the entire program staff simultaneously in single training sessions, although PAT has created separate training institutes for administrators. Avance and PSP do not have specific expectations for educational backgrounds of staff. Rather, they anticipate that the group as a whole will represent a variety of backgrounds and experiences. PAT, on the other hand, expects its prospective parent educators to have a college degree in early childhood or a related field.

*The Training Materials*

All five programs indicate that they have used a similar process to develop their training materials. They maintain that their curricula represent collective efforts that draw upon the combined knowledge and experience of current staff as well as research in the field. Materials are reviewed regularly for appropriate changes. Three programs --HIPPY, MELD, and PSP-- revise their training curricula annually; PAT revises its Birth to Three training curriculum every three years.

The primary difference among the programs in terms of curriculum development is whether they have created one training curriculum or multiple training curricula. Three

programs--PSP, HIPPY, and Avance--use a single basic curriculum for preparing staff, although Avance has created a separate parent and child development curriculum for use in its Parent-Child Education classes. MELD and PAT, by contrast, use different curricula that are designed for different purposes. MELD has developed a basic curriculum to train site coordinators, but it has created separate curricula for parent group facilitators who will work with different populations. In addition to the MELD Young Moms (MYM) curriculum, for example, there is a curriculum for parent group facilitators who will work with Hmong parents, a Spanish curriculum for those who will work with Latino parents, and another curriculum for those who will work with parents who are deaf.

PAT uses two primary curricula for training staff. One is the Program Planning and Implementation Guide (Birth to Three), designed for its original program. The other is Parents as Teachers in the Child Care Center, a curriculum for staff who work with parents of three- to five-year-olds in day care or Head Start programs.

In this study, we used PSP's, Avance's, and HIPPY's basic curricula (PSP, 1994; Avance, undated; and HIPPY, 1994). We also examined the 1990 edition of PAT's Program Planning and Implementation Guide (Birth to Three) and the MELD Young Moms 1993 Training Manual for Parent Group Facilitators.

## Program Philosophy

Our first category for analyzing the training materials is program philosophy. We believe that the theoretical framework within which a program operates and its basic assumptions should drive the training. Staff preparing to offer any family support program must first understand the beliefs that undergird the program's approach to families. To support this understanding, the training materials need to contain an explicit statement of philosophy. References to the theorists and the descriptions of the theories upon which the program is based (including articles or reports for further reading) would also be helpful for trainees, as they would provide additional grounding for the approach.

We used elements of Powell's (1993) typology for home visiting programs for our analysis. Powell looked at the variations in "assumptions" programs make regarding "family resourcefulness" (i.e., "all families need support versus some families have insufficient resources for child rearing") and "determinants of behavior" (i.e., "primary emphasis on parent versus environment [e.g., housing, health care, nutrition]"). Another aspect of a program's philosophy that Powell considered was "strategy for change: emphasis on . . . interpersonal relationship as primary vehicle of individual change versus dissemination of information as key to individual change" (p. 26).

Based on these elements, we formulated four questions for analysis:

- Does the curriculum contain an explicit statement of its philosophy?
- Is the program based on the assumption that all or only some families can benefit from support?
- What is the program's change strategy?
- What is the knowledge base of the program's philosophy?

All of the training curricula contain explicit statements of the program's philosophy and assumptions which are compatible with the principles of family support (Table 3). With varying emphases, each adheres to the notion that parents are the most important people in their children's lives and want the best for them, that all families have strengths, and that support leads to empowerment.

PAT is a program with "universal access." It assumes that all families can benefit from support regardless of their characteristics. MYM, HIPPY, and Avance make the assumption that some families lack resources in child rearing: MYM targets adolescent parents; HIPPY is for "children from educationally and economically disadvantaged backgrounds;" and Avance targets low-income MexicanAmerican mothers, the large majority of whom do not have

## Table 3

### Program Philosophy

| | PSP | MELD-MYM | AVANCE | PAT | HIPPY |
|---|---|---|---|---|---|
| Explicit Statement of Philosophy | Yes | Yes | Yes | Yes | Yes |
| Population Served | Low-income, immigrant, single parents (but states applicability of program to all families) | Adolescent mothers and their children | Low-income, Mexican American families | All families -- universal access | Educationally and economically "disadvantaged" families |
| Change Strategy | Interpersonal relationships | Interpersonal relationships | Information | Information | Information |
| Determinant of Behavior | Parent (with some acknowledgment of environment) | Parent | Parent | Parent | Parent |
| Knowledge Base | Not readily apparent from manual | Group dynamics, adult learning | Not readily apparent from manual | Child development | Child development, literacy acquisition |

a high school diploma. PSP is somewhere in between; while the training curriculum states that "PSP is effective in all kinds of early childhood settings," the materials point to the special needs of low-income families. The sections on program activities describe a low-income, immigrant, and single-parent population served in state-funded child care centers.

All the programs emphasize the parent as the primary determinant of change, through information, social support, or a combination of both. Only the PSP curriculum, while focusing on the parent in its "Guiding Principles" statement, addresses larger societal issues in a section on advocacy. HIPPY makes a single reference to social issues in the context of "Establishing collaborative partnerships with other human service organizations."

The programs differ in their strategies for change. MYM and PSP rely on interpersonal relationships as the primary vehicle for change, MYM with its emphasis on group process, and PSP with its emphasis on group activities. Both focus on fostering supportive relationships among participants as well as between staff and participants. HIPPY, PAT and Avance, on the other hand, rely on information about child development, learning, and parenting skills as paramount.

The curricula vary in the nature and amount of information they provide about the program's knowledge base. MYM provides an extensive annotated reading list of sources, most of which concern group dynamics, experiential group activities, and adult learning. (Aline Auerbach, Bormann and Bormann, Johnson, Otto, Simon, Stevens and Knowles are among those cited.) PAT includes references for some of the child development information contained in the "Resource for Parent Educator" pages. (Brazelton, Honig, Fraiberg, White and Zigler are the most often cited authors.) HIPPY includes reprints of journal articles and reports concerning parents' roles in literacy acquisition for children of color as well as those who are from families with low socioeconomic status. (Edwards, Taylor and Strickland, and Elsa Auerbach are among the authors.) The last section of the PSP curriculum consists of reprints of articles and reports, mostly from *Young Children* and the Family Resource Coalition, with their attendant references, but the theoretical underpinnings of the program are not apparent from the curriculum. As for

Avance, the training manual mentions a few researchers in its description of the curriculum content, but does not contain a reference list or articles.

For those curricula that provide substantive information regarding the theories upon which the programs are based (MYM, PAT and HIPPY), it is apparent that the programs' philosophy statements are consistent with their research base: MYM stresses group interaction, PAT emphasizes child development, and HIPPY focuses on literacy development. The references and readings reflect those emphases.

**Program Goals**

Another general category for analysis is the articulation of program goals, which we divide into several characteristics. One is an explicit statement of the outcomes the program aims to achieve. We believe that such a statement or set of statements are essential for staff's understanding of the program's objectives. Another characteristic is the nature of the families the program intends to serve. This kind of information can help staff understand the rationale for program services--that is, whether the services are designed for all families or for a particular subset of families.

Because family support aims to serve the whole family, we also looked for articulation of anticipated outcomes for individual family members. Here, we sought to determine the objectives that the program aimed to accomplish for children, individual adults, and parents. We included outcomes for parents because support for parents and parent education are basic elements of family support.

Based on these characteristics, we devised the following questions for analysis:

- Does the curriculum contain an explicit statement about anticipated program outcomes?
- Is the curriculum explicit about the nature of the families it intends to serve?

- What, if any, are the program's anticipated outcomes for children, individual adults, and parents?

***Explicit Goal Statement***

All of the curricula present explicit statements of goals (Table 4). These statements generally occur in the first section of the curriculum, which typically discusses the program's history. In some cases, goals are elaborated in other sections of the curricula as well.

PAT's Birth to Three curriculum is explicit about program goals in the first three pages. Under the heading of "The Goals for NPAT," it clearly states that the program aims to increase parents' knowledge of child development and their confidence in their child-rearing abilities; that it aims to improve cognitive, social and language development in young children; and that it seeks to engender positive attitudes towards school among parents. Another goal is to identify "undetected handicapping conditions."

HIPPY also presents its goals in the first section of its curriculum, "What is HIPPY," the History and Rationale of the Program. It lays out two primary goals--educational enrichment of preschool youngsters and increased awareness of parents as home educators. An elaboration of this statement follows in the section on the HIPPY mission. It indicates that HIPPY aims to increase the opportunities for positive school experiences for children from educationally and economically disadvantaged backgrounds.

The first section of the MELD MYM curriculum also presents a general overview of the program. It articulates program goals in terms of the group process--that is, to provide information and support through the "peer self-help approach." Other sections delineate goals for the facilitator and for each discussion.

The MYM training curriculum does not present specific outcomes for program participants. Rather, these outcomes are incorporated in the Evaluation Manual that MELD provides to Site Coordinators. Because MELD has developed different versions of the basic program for different populations, the goals for participants vary from program to program. For

## Table 4

## Training Curricula Explicit Goal Statements

| | PSP | MELD | AVANCE | PAT | HIPPY |
|---|---|---|---|---|---|
| **Explicit Goal Statement** | • To raise parents' self-esteem<br>• To create systems of family support<br>• To build parent leadership<br>• To engender a greater sense of empowerment and healthier family functioning | • To provide information and support through the peer self-help approach<br>• To help "young moms" understand the development of their children, gain positive attitudes towards parenting, and gain skills to manage their personal and family lives | • To strengthen the family unit<br>• To enhance parenting skills<br>• To promote educational success<br>• To foster economic and social successes for parents<br>• To increase parents' knowledge of their children's development<br>• To change the home environment to promote healthy development<br>• To change parents' attitudes toward their children | • To increase parents' knowledge of child development<br>• To increase parents' confidence in their child-rearing abilities<br>• To improve cognitive, social, and language development in young children<br>• To engender positive attitudes towards school among parents<br>• To identify "undetected handicapping conditions" | • To promote educational enrichment of preschool youngsters<br>• To increase awareness of parents as home educators<br>• To increase chances of positive school experiences for children from educationally and economically disadvantaged backgrounds |





BEST COPY AVAILABLE

MYM, they are to help "young moms" understand the development of their children, gain positive attitudes towards parenting, and obtain skills to manage their personal and family lives.

PSP opens its curriculum with a "History" section that includes some general statements about the program's goals to diminish isolation and to build on the strengths of its participants. Sections of the curriculum that follow point to additional goals, including raising self-esteem, creating systems of social support, and building leadership. Other goals of the program, outlined in the "Evaluation" section of the appendix, include an enhanced feeling of empowerment and healthier family functioning.

Unlike the other curricula that are presented in a narrative format, Avance's curriculum is a series of 79 handouts, which consist of bulleted statements, phrases, and paragraphs. Avance's general goals of "strengthening the family unit, enhancing parenting skills, promoting educational success, and fostering economic and social successes for parents," for example, are cited in handouts grouped under the section, "Avance : The Service Provider." More specific goals are articulated in the "Evaluation" section of the curriculum. These are an increase in parents' knowledge of their children's development, changes in the home environment that promote healthy development, and changes in parents' attitudes toward their children.

***Population***

The training materials from all five programs are explicit about the nature of the population they intend to serve. Three--PSP, Avance, and HIPPY--state their mission to work with low-income families, although each aims to serve a specific subset of this population. PSP, for example, refers to its target population as single parents and new immigrants, while HIPPY aims to work with families who are both economically and educationally disadvantaged. Similarly, Avance is explicit about its intent to serve low-income Mexican American families. In contrast to these programs, the PAT training materials do not single out a specific population for services. Rather, they indicate that the program is intended for all families with children from birth to three, irrespective of their background. MELD's MYM curriculum, too, makes no reference to specific economic or social circumstances.

With the exception of Avance, none of the curricula that are designed for specific populations offers more than a general definition of the families that it aims to serve. PSP's curriculum, for example, does not indicate if the immigrants who are its target population are newly arrived from other countries or second-generation families of new immigrant groups. References to activities for families who do not speak English imply that the program is designed for new immigrants, but the curriculum is not clear on this point.

The same lack of clarity applies to HIPPY's curriculum. While the program aims to serve families who are educationally disadvantaged, the curriculum does not define the term. Rather, the curriculum implies that educationally disadvantaged means adults who do not have strong reading skills or who have not had successful school experiences. MELD's MYM training curriculum presents a similar problem. According to the materials, the program is designed for young mothers; however, nowhere in the curriculum is there a definition of this term. The separate child and parent development materials clearly indicate that the program is for adolescents, but there is little specific information about adolescents in the training manual.

***Goals for Individual Adults***

The program goals articulated in the training materials tend to fall into one of two groups --those that emphasize outcomes for individual adults and those that emphasize outcomes for children. PSP and MELD's materials focus on the former, while PAT and HIPPY's materials focus on the latter. Avance falls midway between the groups, with some outcomes for adults and some for children.

PSP and MELD share similar goals for adult development. Both aim to enhance adults' self-esteem and self-confidence, but each expresses this with different language. PSP, for example, explains that the program aims to foster parents' belief in themselves and to support growth in "hopefulness" and "joy." MELD, on the other hand, states that the program aims to help young moms "gain a sense of self-worth and importance" as well as to develop an "[improved] locus of control." In contrast to PSP's aim to promote a change in attitude, MELD seems to aim for a change in behavior. It speaks about helping parents to "cope with issues of

personal development" and "gain skills to manage their personal and family lives" rather than promoting "hopefulness" and "joy."

Avance articulates yet another set of adult development goals. Although there is a reference to "enhanced self-worth," it focuses on changes related to improvement in economic conditions. These are defined as "increased educational and economic competency" and "development of saleable job skills."

Neither HIPPY nor PAT places much emphasis on adult development goals. The HIPPY curriculum does, however, cite several goals in this area. One--reducing social isolation--parallels those articulated by PSP and MELD. The other--providing job skills for paraprofessionals--is unique to HIPPY. Alone among the programs, HIPPY relies on paid paraprofessionals who are recruited from the community to deliver services. The use of paraprofessionals is grounded in HIPPY's belief that parents relate better to their peers than to others who may not reflect their cultural and economic circumstances. It also reflects HIPPY's deliberate intent to provide job opportunities in the communities it serves.

***Goals for Children***

As we noted earlier, the two programs that most clearly articulate goals for child development are PAT and HIPPY. Each aims to produce developmental outcomes that will have an effect on children's experience in school, specifically by improving children's cognitive and language skills. In addition to growth in these domains, PAT aims to improve social and motor development.

The principal difference in the nature of the child development goals for these two home visiting programs seems to be a function of both the target population and the program design. HIPPY is intended to serve four- and five-year-old children who may already be participating in some kind of preschool program that offers opportunities for socialization as well as physical development. PAT, on the other hand, is intended for infants and toddlers, who are at an entirely different stage in their development and whose parents may not use an organized early childhood program.

Another difference may be related to the philosophy that informs each program. HIPPY aims to support educational enrichment for preschoolers, specifically poor children whose parents do not have extensive formal education. The curriculum delineates a program that is structured around role-playing activities that parents do with their children. The role-play for each activity clearly states its objective and provides a script that parents with limited reading skills can easily follow. The activities focus on specific cognitive skills such as visual and auditory discrimination, spatial perception, pre-math concepts, and logical thinking.

By contrast, PAT aims to foster a broad range of developmental domains--language, social, emotional, motor--for all children. The curriculum offers a variety of activities for parents to use to support their children's growth. In addition, the curriculum includes screening techniques to enable the parent educators--and the parents--to detect potential problems in vision, hearing, language, and overall development.

PSP and MELD do not state any explicit goals for child development in their curricula. The reason for the lack of child development goals in PSP's curriculum may be related to its structure. The program is designed to operate in day care centers, which aim to foster children's development. As a result, it may be assumed that goals in this area will be met by the child care component of the program.

Avance's curriculum represents the middle ground between the five programs. Two handouts refer specifically to goals for child development--enhanced understanding of basic concepts and improved growth and development. These are, however, the only explicit references to outcomes for children, although mastery of certain skills is implicit in the toy making activities that are an essential element of the nine-month Parent-Child Education program. Like PSP, Avance may not identify child development goals because children participate in an organized early childhood program while their parents participate in parenting classes.

*Goals for Parents*

Four of the five programs--PAT, HIPPY, Avance, and MELD--articulate specific goals for parents. PSP is the exception. It does not state any direct goals for parent development, although it acknowledges the importance of parents' well-being for the healthy development of their children.

HIPPY, PAT, and Avance place a strong emphasis on goals for parents, in large part because their programs are premised on the notion that parents are their children's first teachers. The two home visiting programs, PAT and HIPPY, aim to increase parents' knowledge of child development as well as to increase their confidence in their role as parents. Avance, on the other hand, seeks to enhance parenting skills. It also aims to enhance parents' ability to provide for children's healthy growth and to reduce the likelihood of life-threatening conditions.

Both Avance and HIPPY aim to improve parent-child relationships. Of the two, Avance is the more explicit. Its curriculum's "Evaluation" section indicates that the program seeks to enhance parents' interactions with their children, especially with regard to verbal communication. HIPPY's goal in this area is unclear.

PAT, HIPPY, and Avance also seek to improve parents' relationship with their children's schools. PAT aims to engender a positive attitude; HIPPY, increased involvement; and Avance, the ability to make sound educational decisions and to strengthen the parents' role as advocate.

MELD's goals for parents differ from those of the three other programs. Rather than focusing on parents' role as their children's teacher, it aims to enhance outcomes for parents in the context of reducing child abuse. It is the only program among the four that places an explicit emphasis on understanding discipline for children under two as a goal, although it shares with the others the aims of enhancing knowledge of child development and improving positive attitudes towards parenting.

*Consistency*

The consistency between the programs' goals and their philosophy varies across the training curricula. Four of the five programs--MELD, Avance, PAT, and HIPPY--demonstrate a consistent fit: their aims for parents and children reflect their assumptions about family resourcefulness, determinants of change, and change strategies.

By contrast, there appears to be some discontinuity between PSP's philosophy and its goals, particularly in terms of its views of family resourcefulness. Although PSP espouses the belief that all families need support at some point, its goal is to serve a specific group of families which it implies need support more than others. This position may simply reflect the need to focus on a group of families for programmatic purposes, but additional explanation about its rationale would be helpful.

## Training Curriculum Content

The purpose of this category is to understand the kinds of information that the training materials present to staff. Our rationale for creating it is straightforward. We sought to determine how the training curricula prepared staff to offer program services, because we believe that the curriculum content reflects programs' priorities for the kinds of knowledge and skills that staff will need.

Four questions guided our analysis. They were:

- Do the training materials include a list of topics, and, if so, what topics are included?
- What kinds of information does the training curriculum offer about adult, child, or parent development (content information); about how to offer services for adults, children, and parents (process information); and about how to implement the program (procedural information)?
- What is the balance in the training materials among content, process, and procedural information?

- Is the training curriculum content consistent with the stated program goals?

***List of Topics***

All of the programs contain a table of contents, and all five divide the material into multiple sections. Table 5 lists both the table of contents and the headings for various sections.

***Content Information***

The content information provided in the training materials is generally consistent with the outcomes the programs aim to achieve. PSP and MELD emphasize adult development, while PAT and HIPPY focus on child development.

Within this general framework, however, there are some significant differences among the programs. Of the five curricula, MELD, PAT, and to a lesser degree, HIPPY, offer extensive information about human development as it relates to their primary goals. The MYM curriculum, for example, offers a great deal of information about how adults learn. PAT's "Personal Visit Lesson Plans" present detailed information on cognitive, social, language and motor development; HIPPY provides information on cognitive and language development as well as the theory behind role-plays.

In contrast, neither PSP nor Avance provides much content information on development. In PSP's training materials, there is little discussion about adult development in general or as it relates to PSP's goals of reducing isolation and stress or improving self-esteem. Avance's training materials, too, lack information in this area. The training manual does not address these issues for adults, children, or parents, but it includes a description of each lesson in the "Parent-Child Education" curriculum.

***Process Information***

All five curricula provide information on the process staff will need to implement the program. Like content, the process information is consistent with the outcomes the programs aim to achieve: adult development or parent/child development. The approach for describing

## Table 5

## Training Curricula Table of Contents

| | PSP | MELD | AVANCE | PAT | HIPPY |
|---|---|---|---|---|---|
| Section Headings | • History<br>• PSP Activities<br>• Organizing a PSP Program | • Overview<br>• Support<br>• Information<br>• Group Coordination<br>• Team Development<br>• Support & Coordination | • Avance: The Service Provider<br>• Recruiting<br>• Toymaking<br>• What is a Parent Educator?<br>• Lesson Plans<br>• Curriculum<br>• Protocol for Parent Educators<br>• Home Visiting<br>• Administration<br>• Evaluation | • PAT History<br>• Program Planning<br>• Personal Visit Lesson Plans<br>• Your Child Materials<br>• Group Meetings<br>• Other Resources for Parent Educators<br>• Resources for Screening<br>• Recordkeeping Forms<br>• Evaluation Forms<br>• Index | • Training Agenda<br>• History & Rationale<br>• Overview<br>• Advisory Board Function<br>• Group Meetings<br>• Home Visits<br>• Role-Playing<br>• Job Descriptions<br>• Working with Volunteers<br>• Start-up HIPPY<br>• Management Information System<br>• HIPPY in the National Agenda<br>• Relevant articles |

activities, however, varies across programs. Throughout its curriculum, PSP uses examples from existing programs to illustrate how to organize activities that are designed to promote a sense of belonging and personal growth. MELD, by contrast, uses detailed agendas about how to organize group meetings. Each agenda includes a purpose, rationale, content outline, suggested times, activities and anticipated outcomes.

In their training materials, PAT and HIPPY describe how to conduct home visits in great detail. In each lesson plan, for example, PAT includes specific information, including goals for personal visits, guidelines for personal visit plans, and specific instructions. HIPPY's training curriculum contains information on role-plays, including activities based on storybooks and guidelines for home visits. Both programs also include information about how to conduct the group meetings that are intended to supplement the home visits.

Avance uses step-by-step directions in its training materials. Handouts provide details about how to organize parent education classes as well as a list of the lesson plans for the required 35 sessions. The curriculum also offers specific directions, including price lists of materials, on how to conduct the toy making classes. Home visiting information and protocols are included as well.

***Procedure Information***

The programs all provide information on procedures in their training materials. Reflecting their style and structure, the nature of the information varies from program to program. PAT and HIPPY tend to provide the most detailed information in this area. The PAT curriculum presents information about how to organize and market a PAT program, how to recruit and enroll families, and how to select facilities for group meetings. In addition, it includes registration forms, pre- and post-test evaluation surveys, and health screening forms.

HIPPY's curriculum is equally comprehensive. Among the materials are a contract to implement a HIPPY program, a description of the role of the Advisory Board, job descriptions for the site coordinator and the paraprofessional staff, an order form for purchasing the

storybooks, a manual for using the management information system, and evaluation forms for the site visits from national staff.

Avance's procedural information covers a broad range of issues. The curriculum includes organization charts and descriptions of program administration as well as order forms for the curriculum lesson plans and toy making materials. It also describes how to recruit parents, how to arrange bus schedules, and how to use the forms for the home visit evaluations.

MELD and PSP do not offer this level of detail. Consistent with MELD's emphasis on group process, the procedural information in the MYM curriculum focuses primarily on creating environments for and organizing group meetings. The curriculum does not include other procedural information about administration or recordkeeping because that information is included in the Site Coordinators' curriculum.

PSP's procedural information reflects its general orientation towards program services. The curriculum includes advice on developing parent leadership and building PSP coalitions as well as information about surveying participants' interests, budgets for specific kinds of activities, agendas for meetings, and several job descriptions. Consistent with its presentation of other kinds of information, PSP sites examples from current programs for procedure.

***Balance***

The curricula vary in their emphasis on content. PAT and HIPPY seem to give equal weight to content, process, and procedural information. The others present one or two types of information in greater depth. PSP emphasizes process; MELD stresses process and content; and Avance places its emphasis on process and procedure.

In large part the difference in the curriculum content seems to be related to program structure. Both PAT and HIPPY operate on the equivalent of a franchise system. The organizations that use these programs--school systems, community-based organizations--will function independently after the staff have completed the training. Staff need complete information to implement the program because they may not have much contact with the national staff after they return to their sites. (HIPPY provides two site visits.). By contrast, MELD and

PSP aim to work with programs for two years and to support them to varying degrees during this period. Staff who complete the training can rely on consultations from national staff; therefore, they can turn to them for information they may not have obtained in the training.

***Consistency***

The difference in program structure does not explain several inconsistencies between the training curriculum content and the program goals. These inconsistencies occur in the training curricula of three programs--PAT, HIPPY, and Avance. Both PAT and HIPPY, for example, cite as a goal enhancing parents' attitudes to or involvement with their children's school. There is no evidence in PAT's materials of content about this goal. HIPPY's only references occur in the context of topics for the group meetings, which HIPPY suggests can focus on the school system.

The other area in which there appears to be an inconsistency relates to Avance's and HIPPY's goals for providing opportunities for economic growth for participants: HIPPY aims to offer jobs for individuals from the community, while Avance tries to help adults develop "economic" competence and "saleable job skills." Although these issues may be addressed in the training, the curricula offer little information to staff about how to achieve these goals.

## Training Process

The process of training is crucial because the ability of the trainees to successfully assimilate the material is dependent upon how the information (training content) is conveyed. Process is especially important in family support, since it is one of the most salient features that distinguishes the approach from other more traditional forms of education and service delivery. We believe that training should model the process that the trainees will use in the program.

We looked at elements of process that included theory, practices, and logistics, and formulated the following questions for analysis:

- Is the training process consistent with accepted principles of adult learning?
- What teaching strategies are used?

- Is there an opportunity for participants to assess the training?
- Does the training manual contain an explicit agenda of activities?
- What is the duration of the training?
- What is the setting for the training?
- What is the size of the group being trained?

The findings in this section represent an examination of the training curricula for information they convey about the training process, as well as data from interviews with the programs' executive directors and their senior training staff. Since we did not have the opportunity to observe the training sessions, the interviews provided information on process that was not available in the written materials. Avance was the only program that did not respond to our requests for an interview.

***Consistency With Adult Learning Principles***

Among the adult learning principles which Brookfield (1990) identified as validated by the majority of educators, the following are most relevant to this study: "Experience of the learner is a major resource in learning situations. . . . Adults tend to be life-centered in their orientation to learning. . . . Active learner participation in the learning process contributes to learning. . . . A comfortable supportive environment is a key to successful learning" (p. 38), and "Adults learn more effectively through experiential techniques of education such as discussion or problem-solving" (p. 92). Brookfield also discussed a 1984 work by Knowles and Associates, which identified related components of practice:

> Facilitators must establish a physical and psychological climate conducive to learning . . . by creating a climate of mutual respect among all participants, by emphasizing collaborative modes of learning, by establishing an atmosphere of mutual trust, by offering to be supportive, and by emphasizing that learning is pleasant. . . .

> Facilitators must involve learners in mutual planning of methods and curricular decisions. (pp. 101-102)

It is evident that "best practice" in adult learning is consistent with the principles of family support.

In its training materials, MYM is explicit about its adherence to the preceding principles. The notion that individuals learn from one another is an essential element of both the program and the training philosophy. Because the training is intended to model the group interaction process, it is designed to be experiential. Training participants work with the trainers to set the agenda, and the topics are modified to meet the needs of the group. There is a strong emphasis on sharing experiences and reflection. At the same time, there is an intentional effort to ensure that training participants are comfortable: food is served and the scheduling is flexible.

PSP's training is also intended to model its goal of creating social supports. The training materials are explicit about honoring individual knowledge and respecting individual experience, and they emphasize the importance of participants' ownership of the training and adapting the training to the needs of the group. Before the sessions, participants receive a draft agenda that they may review and revise on the first day of training. During the training, workshops are shortened if interest wanes, participants are encouraged to take care of their personal needs, and food is served.

PAT and HIPPY are not explicit about adult learning principles in their training curriculum for participants, but these principles are acknowledged in the practice that staff is expected to use in home visits and group meetings. PAT, for example, discusses the need for responsiveness in home visits, while HIPPY addresses differences in adult learning styles in its discussions on role-playing.

Both PAT and HIPPY offer opportunities for individual adaptation and reflection during small group discussions. PAT solicits verbal and written suggestions for changes in the training on a daily basis; it also conducts a midweek assessment to ensure that training participants' needs are met. HIPPY uses the information it obtains through its informal daily debriefings to modify the agenda for the next day. Its training staff also watch for body signals that may indicate the

need for modifications. In addition, opportunities are offered for training participants to meet with staff after the formal sessions.

Providing an opportunity for individuals to assess the training represents a concrete acknowledgment of their abilities and respect for their judgment. As Brookfield (1990) asserted, "Facilitators must involve learners in evaluating their learning, principally through the use of qualitative evaluative modes" (p. 102). All five of the programs distribute evaluation forms at the conclusion of their preservice training programs. In general, these forms address similar issues: satisfaction with the training, assessment of its usefulness in terms of information and skills, and suggestions for change.

***Teaching Strategies***

Each of the programs includes an explicit training agenda within its training materials. All use strategies consistent with the adult learning principles of active participation in the learning process and experiential activities. While "passive" approaches, such as lectures and videos, are also employed, the emphasis across programs seems to be on large and small group discussions, role-play, site visits, and experiential activities.

MYM is the most explicit in its training curriculum about the specific teaching methods used; "empathy experience," "sharing time," "discussion," "role-play" and "brainstorm" are among the strategies mentioned in the training agenda as well as in the body of the curriculum itself. The training for site coordinators also includes site visits to programs comparable to those that the trainees will offer, and a panel of local parent group facilitators that is brought in for discussion with the trainees.

Role-playing is a major part of the HIPPY training. It is used for modeling the relationships between the coordinator and the paraprofessional, the paraprofessional and the child, the paraprofessional and the parent, and the parent and child. Lectures and videos are used in the plenary sessions, while the break-out sessions provide opportunities for small group discussion as well as exercises. The skills area, which includes program books and

relatedmaterials, offers opportunities for hands-on activities. Four site visits provide an opportunity to observe home visits as well as group meetings.

PSP relies on small group discussions as a primary teaching strategy, along with role-plays and experiential activities such as cooking classes, which are generally offered at the sites, if the training is located in California. Three site visits are generally included during the five-day training, and experts on specific topics are invited to facilitate discussions. PAT's training begins with a formal lecture on the history and foundation of the program, including videos that have been produced by PAT. The remainder of the training consists primarily of interactive strategies such as brainstorming, small group discussions, and experiential exercises. There is also a resource library of books and materials available to participants. Training at the PAT National Center includes an observation of a trained parent educator conducting a home visit. In other states, a visit is included where possible; alternatively, a video of a home visit is shown.

While the Avance manual contains an agenda that includes a video presentation, discussion, and site visits, the specific teaching strategies used in the training are not evident in the body of the text, and, as noted above, Avance did not respond to our requests for an interview.

***Duration and Number of Trainings***

Three of the five programs in our study--PSP, PAT, and HIPPY--offer a five-day preservice training (Table 6). Avance and MELD use a shorter period of time. Avance offers training in a two-and-a-half-day period, while MELD's training for MYM facilitators consists of approximately 20 hours over a four-day weekend. HIPPY offers its preservice training twice a year, in July and in October, while PSP offers three trainings annually. MELD provides threetrainings a year for Site Coordinators. In 1993-1994, PAT offered a total of 66 training sessions, 52 of which were Birth to Three. In August of 1994 alone, seven Birth to Three training courses were offered.

## Table 6
## Training Structure

| | PSP * | MELD * | AVANCE ** | PAT * | HIPPY * |
|---|---|---|---|---|---|
| **Duration** | • 5-day preservice training<br>• 3 trainings annually | • 20 hour preservice training | • 2 and a half day training period | •5-day preservice training<br>• 66 training sessions | • 5-day preservice training<br>• 2 trainings annually |
| **Setting** | • Flagship sites in California -- in one of the child care centers where a PSP program is operating<br>• Replication sites in Florida -- at a conference center | • Initial site coordinator training in Minneapolis -- at MELD's offices | | • University of Missouri at St. Louis where its National Training Center is located<br>• A variety of settings in different states and countries | • The auditorium and break-out rooms of the Arkansas Children's Hospital<br>• Future trainings in Dallas will be offered in similar spaces at the D'Art Museum |
| **Group Size** | • 10 to 25 participants | • 10 to 25 participants | | • 25 to 30 participants (50 maximum) | • 40 to 50 participants |
| **Staffing of the Training** | • 2 or 3 trainers<br>• Additional staff in local programs | • 2 - 4 trainers<br>• Additional staff who will work with the site during the next 24 months | | • 7 staff for Birth to Three<br>• Core team of 2 trainers; 2 - 5 other trainers from other program sites | • 8 - 10 trainers<br>• Core team of 5 - 6 trainers from national staff<br>• 6 staff from local programs |

* Based on interviews
** No interview data for Avance

BEST COPY AVAILABLE

*Setting*

The settings for the training vary. PSP offers training at its flagship sites in California as well as at replication sites in Florida. In California, the training is offered in one of the child care centers where a PSP program is operating, while in Florida, the training has been offered at a conference center. MYM generally offers the initial Site Coordinator training at its offices in Minneapolis; MYM facilitator training is arranged in different locations such as churches in the community.

For the most part, PAT and HIPPY use formal settings for their training. PAT offers many of its training sessions at the University of Missouri-St. Louis campus where its National Training Center is located. Because it also provides training on request to programs outside of Missouri, it has used a variety of settings in different states and countries.

HIPPY, too, has access to a training facility. In Arkansas, where it has conducted most of its preservice training in the past, it uses the auditorium and break-out rooms at the Arkansas Children's Hospital. Future trainings in Dallas will be offered in similar kinds of space in the D'Art Museum.

*Group Size*

The number of participants in training sessions ranges from 10 to 50. For MYM coordinator training, the typical group size falls somewhere between 10 and 25; PSP aims for no more than 20 people in a training group. HIPPY's group size averages between 40 and 50; in the past, it has not set an upper limit on the number of participants. By contrast, PAT's training groups for Birth to Three preservice training range between 25 and 30. Its maximum enrollment is 50; under these conditions, it will divide the group in half.

**Design of the Curriculum Materials**

We studied the training manuals for clarity and "user friendliness." Among the design features we examined are:

- organization (table of contents, page numbering, tabs or separations between sections)
- format and typography (fonts, type size, use of boldface, white spaces)
- use of graphics (charts, tables, drawings, photographs)
- accuracy in text (grammar, punctuation, spelling, typographical errors)

Some of our colleagues maintain that the last element, accuracy in text, is unimportant in family support, since they consider the meaningful factors to be the content and the relationships among the people involved in the training. We believe that careful editing conveys respect for the reader, who may become confused by inaccuracies in the text. The written materials also represent a concrete reflection of the program and serve as a model of literacy, which may be an explicit or implicit goal for adult development in many family support programs.

***Organization***

All of the curricula contain a table of contents of some sort (Table 7). PAT contains a very detailed table of contents with consistent page numbering. PSP does not contain a table of contents for the first half of its curriculum, which consists of descriptions of the various program components; the second half contains a listing, without page numbers, of "handouts and articles." HIPPY's curriculum includes a table of contents, but it lacks page numbers. The MYM training curriculum is unique in its organization: tan "training manual (TM)" pages are interspersed throughout with buff "parent group facilitator pages (PGF)" which relate to the material in the training pages. Although subject titles are found in the upper right corner of every page, it can be difficult to locate information. For instance, pages TM 66 to 68 are found between pages PGF 44 and 45.

Most of the manuals have separations between sections. PSP, for example, has blank pages of a contrasting color between sections; however, without titles or pagination, they are not very helpful. HIPPY has numbered tabs that correspond to the sections in the table of contents. To determine the content of the section, one must refer back to the table of contents. Avance

## Table 7

### Training Curriculum Design

| | PSP | MELD-MYM | AVANCE | PAT | HIPPY |
|---|---|---|---|---|---|
| Table of Contents | List of handouts and articles in second half of manual | Table of Contents with page numbers for TM pages | List of topics and numbered handouts | Table of Contents with page numbers | List of topics |
| Pagination | Inconsistent or no pagination | TM & PGF pages paginated separately and interspersed | Handouts are numbered | Consistent pagination | No consistent pagination |
| Separations Between Sections | Blank gold pages | Title pages separate sections -- no tabs | Title pages --no tabs | Laminated, labeled tabs | Numbered but unlabeled tabs |
| Format and Typography | Includes PSP program descriptions and reprints of articles | Consistent typography | Large print and boldface | Clear, varied, but unified | Includes HIPPY materials and reprints of articles |
| Use of Graphics | Photos | None | 2 photos | Drawings of parents and children | None |
| Accuracy in Text | Well edited | Well edited | Would benefit from more careful editing | Well edited | Well edited |

does not provide separations, but the manual consists of handouts which are consecutively numbered. Only PAT has clearly labeled, laminated tabs between sections.

***Format and Typography***

The format and typography vary across the curricula; each uses a different style, ranging from MYM's single, small size font, underlining instead of boldface, and a great deal of text on each page, to Avance's mostly single page "handouts" (lists or outlines) with large print, boldface titles and subtitles, and lots of white space, with as few as 31 words on a page. The consistency in design also varies. PAT, MELD, and Avance are uniformly consistent, but MELD intersperses TM and PGF pages. PSP's and HIPPY's materials are less consistent in design, largely because they include reprints of a variety of articles.

***Use of Graphics***

While all of the training manuals include information in chart and/or checklist form, none of them contains many illustrations or photographs. There are no illustrations in HIPPY, MYM, or Avance materials, with the exception of two photos in Avance's "toymaking" section and the photos and drawings in reprinted articles. PAT uses drawings of parents and children (with an attempt to depict different ethnicities) in its "parent handout" materials, and PSP includes photos in its program descriptions. For the most part, there are few graphic representations across the curricula.

***Accuracy in Text***

A well-edited document should have a minimum of typographical errors, misspellings, and inconsistencies. According to these criteria, four of the manuals were carefully edited. Avance, however, contained a number of misspellings, inconsistencies, and typographical errors. Lapses in grammar were noted as well (for example, "We at all times are to take into consideration the other people's point of view and mood that the other may be going through especially if the person is not being his normal self.")

## Acknowledgment of Cultural Diversity

In this category, we sought to identify the ways in which the training materials acknowledge the differences that characterize families. Our choice of this category was based, in large part, on the role that cultural diversity plays in the family support approach. Acknowledgment of differences is primary in two family support principles. One is the notion of mutually respectful relationships between staff and participants, and the other is the notion of building on strengths.

As we had in program philosophy and program goals, we looked for explicit recognition in the training materials that there are differences among families. Although these differences can encompass a wide range of characteristics, we limited our analysis to six: customs and traditions, ethnicity, language, parenting styles, gender, and socioeconomic status, including educational background.

### *Explicit Recognition of Cultural Diversity*

There are distinct differences in the ways the training materials acknowledge cultural diversity. Some are direct about the importance of valuing differences, while others do not make many references to this issue. PSP's training materials are the most explicit. In different sections, the curriculum discusses differences among families and individuals and describes various activities and strategies for acknowledging them. HIPPY and Avance also expressly acknowledge differences, but each tends to focus more narrowly on a limited number of characteristics. By contrast, MELD and PAT tend to address these issues in specific curricula that are designed for special populations.

### *Customs, Traditions, and Ethnicity*

PSP is straightforward and direct about acknowledging differences in culture, traditions, and ethnicity. Citing examples of activities that have been used by existing PSP programs, it presents information on "Activities for Many Cultures," "Working with Newcomers," and

"Tackling Hard Issues" such as "turfism," "gender-based disputes," and "racism/social insensitivity." Consistent with current thinking on cultural competence (Derman-Sparks, 1989), the materials suggest that programs celebrate cultural diversity as part of the daily curriculum.

HIPPY and Avance offer only limited acknowledgment of differences in culture and ethnicity. HIPPY makes only a few references to these issues in its materials. The primary example is the matrix used to describe the storybooks that are part of the activity packets. It categorizes the books by ethnic representation ("African-American, Multi-ethnic, White, Hispanic, Native American - Navaho [sic], and physically challenged"), gender, geographic setting (urban, suburban, or rural), and family "model" ("non-specific, traditional, extended, father-son, traditional-extended, single male, and single grandparent").

Avance's approach to cultural diversity differs from the others. Its materials focus largely on one specific population, Mexican American families, for whom the program is intended. Handouts encourage prospective staff to take into account "Cultural Considerations": the "Context of [the] Mexican-American Population," the "Culture of Traditional Social Institutions," and the "Culture of the Neighborhood," although there is no further explanation of these phrases in the curriculum. There are no references to any other ethnic group.

MELD and PAT do not, for the most part, make any explicit references to differences among families, although the PAT curriculum includes some illustrations that show African American or Asian American children. Instead, each program has developed materials for staff who work with specific populations. MELD, for example, has prepared separate curricula for parent group facilitators who work with Hmong families or Latino families, while PAT has developed a curriculum for Native Americans.

All five programs attempt to respond to diversity by matching their trainers to the participants in the training. PSP and MELD use trainers from specific ethnic groups such as Asian Americans or African Americans to prepare others who will work with these populations. PAT and HIPPY follow a similar approach.

***Language***

Only PSP's and Avance's curricula make any special reference to language differences. PSP's materials explicitly acknowledge that language may be an important issue for families, especially those who are new immigrants. It suggests the use of translators for families who do not speak English, and it describes activities that programs can use to help new Americans adjust to their communities. Avance's reference to language in its curriculum, while explicit, is limited to one handout, in which it advises staff to "respect language preferences."

None of the programs offers training in a language other than English, although PSP indicates that it has used translators in its training. Several of them have, however, developed separate curricula or training in other languages. MELD provides special training for parent group facilitators in Hmong, Spanish, and American Sign Language for the Deaf. PAT's materials are available in Spanish, Portuguese and Vietnamese, while 7 of Avance's 27 lesson plans and all of the transparencies and educator guides are available in Spanish. MELD, too, has developed a Spanish curriculum for facilitators.

***Parenting Styles***

Like language, the two programs that are explicit about parenting styles in their training materials are PSP and Avance, although MELD refers to Hmong culture and its relationship to parenting in its Hmong curriculum. PSP is the only program that makes references to the fact that culture may affect attitudes towards child-rearing. Avance's reference to parenting styles, although direct, is brief. One handout refers to acknowledging "familial issues."

***Gender***

The references to gender that we sought to analyze apply to both parents and children. In terms of the former, we looked for explicit acknowledgment of both genders. PSP and PAT are the only programs that refer specifically to the role that men play in the lives of their families. PSP acknowledges the importance of engaging men in its discussion of several activities,

including men's clubs. PAT's reference to men, by contrast, is presented in the context of parent-child interactions. A handout for parents, entitled "Fun with Dad," suggests activities that fathers and toddlers can do together. The proposed activities--"Washing the Car, Shoveling in the Garden or Snow, The Tool Box, Camp in the Back Yard, Play Catch"--suggest that these are only appropriate for men, although they could just as easily involve women.

HIPPY's acknowledgment of gender differences occurs primarily in the matrix on storybooks which includes gender, among other characteristics. The cited gender categories include "boy-girl, female cat, female frog, man, boy-grandmother, and male caterpillar." The other references to gender in the text--in the discussion of role-plays and home visits--emphasize "moms" exclusively rather than mothers and fathers.

For the most part, Avance, PAT, and HIPPY use gender-neutral language when they discuss child development issues. Among the three, however, PAT tends to use gender-specific language more than the others. When it does so, masculine terminology predominates.

***Socioeconomic Status***

In large part, references to differences in socioeconomic status seem to be related to the goals and the target populations of the programs. PSP, HIPPY, and Avance, the three programs that are designed for low-income populations, acknowledge these differences, while PAT and MELD, the two that aim to serve families from all economic strata, do not.

As it does with other cultural differences, PSP's materials address the issue of socioeconomic status with examples from existing programs. Two activities in particular are designed to respond to the needs of low-income families. One is the "Parent Options Fund," which PSP describes as an opportunity for low-income families to exercise choice over their spending. The other is the "Sick Child Care" program which is intended to provide emergency care for working parents with ill children.

HIPPY refers to income and educational status in its explanation of home visits. It acknowledges that the program is specifically intended for parents whose negative school experiences may have created doubts about their own ability to teach their children. Another

reference applies to weak readers who may be uncomfortable in group meetings. Among the proposed enrichment activities for group meetings are high school equivalency degree classes and job training, which provide some indication about HIPPY's expectations for parents' needs. There is no further elaboration in the training materials.

Avance makes two direct references to income and education. One is the reference to the "Culture of Poverty." The other is in the handout on parent education classes, where staff are advised to accept that "parents are at different levels." Other handouts that describe how to recruit parents and how to organize the first parent education class implicitly refer to economic and social differences. These advise staff, "Do not enter [the house] if there is a drunk person answering the door," and "Have extra clean used clothing for special needs."

For the most part, there are no references to economic or social differences in the PAT or MELD training materials. Isolated references in the PAT curriculum, however, seem to imply that it is designed for middle class, suburban families. One is the example of "Fun with Dad" that we cited previously. The proposed activities--washing the car, shoveling in the garden or the snow, camping in the back yard--might be difficult or impossible for poor urban families who do not have a car, a garden, or a back yard.

### Semantics

Language conveys attitudes as well as information. Vocabulary and the way it is used can reflect respect or disrespect. For family support, where respect is paramount, language is critical. To gain an understanding of the ways in which attitudes are conveyed to prospective staff, we sought to analyze the language that the programs in our study use in their materials. Drawing on Cochran's (1994) work on empowerment, we looked for three attitudes in particular: respect for training participants, acknowledgment of individual strengths, and capacity for growth. We recognize that a "communications audit" like this will offer an incomplete picture of attitudes, but we believe that it will provide some indication of the programs' approach toward their staff and participants as individuals, as well as an implicit expression of values.

PSP supports each of these characteristics. Among the guiding principles of the program is an explicit acknowledgment of mutually respectful relationships between the staff and parents. "PSP's first priority is to establish and nurture the relationship," the "History" section states. Programs are expected to "create an atmosphere" that incorporates attributes of "shared turf and ownership, inclusivity--beyond acceptance--and a climate of trust." This kind of language is also used to describe staff development: "Staff [should have] the chance to. . . identify their own strengths. . . . They have to be open and cooperate in solving problems. . . . [Staff development] is an ongoing process that grows out of building trust. . ."

MYM, too, demonstrates respect consistently throughout its materials. The MYM training manual explicitly emphasizes the importance of this value. Parent group facilitators are encouraged to "share [their] own feelings and ideas" and to "be open and responsive to all ideas." In a section that focuses on the arrangements for meetings, the text again points to the importance of respect for individuals. It states that "all the arrangements that have been made are signals to participants that they are important, that their needs have been considered and tended to." Furthermore, MYM acknowledges individuals' strengths and their capacity for growth. The curriculum advises parent group facilitators to "turn the issue [under discussion] to the large group. . . . This enhances parents' ability to help one another." Support for the team of parent group facilitators (a team of two usually facilitates a meeting) is evident in the statement "team problems are normal. . . . A team without problems is a team without questions, and a team without questions is a team without growth." The program's attitude toward its teen participants is expressed in its goal of enhancing "curiosity and interest in the world so that [they continue] to learn and grow; so that [they set] future goals. . . which don't underestimate [their] abilities."

The PAT Birth to Three training curriculum also uses clear language to convey respect for individuals, an awareness of individual strengths, and a belief in the capacity for growth. These attitudes are explicitly articulated in its basic assumptions about families--that "all families have strengths [and] want to be good parents" and that "information [can] assist parents in their parenting role." The language in the "Personal Visit Plans" illustrates these attitudes of respect. The lesson plans state that PAT educators should "establish rapport with the family," "solicit and

respond to parents' questions and concerns," and "encourage discussion." The "Personal Visit Plans" also serve as an example of PAT's attitudes towards individual strengths. Parent educators are encouraged to "identify and reinforce strengths of parents" and to discuss the "importance of the parents' role as teachers of their baby."

The HIPPY notion that all parents want the best for their children implies respect; the notion that HIPPY can provide opportunities for parents to play active roles as their children's primary educators implies a belief in strengths and a capacity for personal growth. These attitudes are conveyed in the view of role-playing as a safe environment that supports individual differences: "Role-playing creates a nonthreatening environment where there is always room for mistakes." In other instances, however, there is a subtle dissonance between these attitudes and the language used in the curriculum. For example, the trainees (prospective program coordinators) are advised to "make sure that you have not invited [as a speaker for the group meeting] someone who will talk down to the parents." They also learn that "thanks to role-playing, the parent group feels at ease, the paraprofessional can manage, and the iliterate [sic] parents can participate." The implicit assumption seems to be that the relationship between the program coordinators, on one hand, and the paraprofessionals and parents, on the other, is hierarchical rather than equal.

Avance's training manual conveys different attitudes. While the program is based on implicit assumptions of strengths and respect, the language is more directive. One of the goals for the parent educator, for example, is "to program parents. . . for success." Parent educators are informed that they should "*allow* parents to talk, contribute and ask questions" [emphasis added], that they should "model positive reinforcement," and that they should "repeat, repeat, repeat, repeat." Another handout states that "parents are to be told that all are expected to address each other with respect." The text conveys the assumption that knowledge resides primarily in the parent educator and must be transferred to the parent, and that social skills must also be taught.

## Discussion

Family support is entering a crucial period. In the early 1980's, the field was concerned with defining the distinguishing characteristics of its approach and raising public awareness of its effectiveness. Over the past decade, it has gained increasing recognition as a legitimate approach for achieving a wide variety of public policy objectives including school readiness, economic independence, child abuse prevention, and family literacy. Several states have launched their own family support initiatives. A growing number of federal programs aim to support linkages between family support and early child care and education, housing for families who are poor or who have been homeless, and child welfare initiatives. Since 1993, federal funding has been available to the states to create family support programs at the local level.

This acceptance of family support has raised a new set of issues for the field. The availability of public funds will subject programs to greater scrutiny, as lawmakers demand accountability for taxpayers' dollars. Family support programs will be expected to produce results that reflect concrete gains for families and their children. They will have to define their outcomes in ways that are acceptable to policymakers who seek to make the most effective use of limited resources.

The demand for results--in terms of defining and measuring outcomes--will represent an enormous challenge for a field that does not yet have a clear consensus about what constitutes effectiveness. To some degree, this lack of consensus seems to be a function of the field's difficulty in defining itself. On one hand, family support presents itself as an approach that is grounded in a set of principles and practices. On the other hand, it presents itself as a set of service delivery models that are informed by these principles and practices.

This distinction has serious implications. If family support defines itself as an approach, the field may move towards integration of its principles into a wide variety of systems and services. If it defines itself as a set of models, it may move towards creating an infrastructure for expanding these programs. In either case, family support will face the issue of determining the elements that represent good practice.

The findings from this study provide some insight into the complexity of these issues. The initial purpose of our work was to compare the training offered by five prominent family support programs. We believed that such a comparison would yield some information about the commonalities and differences in the ways that these programs prepared staff to offer services. In addition, we hoped to create a framework for analyzing training that would serve as a useful guide for policymakers and providers who are responsible for selecting training for their own programs.

The analysis revealed some interesting results. It demonstrated that there were some common elements and some distinct differences across the training programs, and at the same time, it raised questions about several broad issues. One set of issues is related to training offered by specific programs and the challenges these programs may face in the future. The other set is related to family support training in general.

***What Are the Commonalities in the Training Materials and the Training?***

The programs in this study--PSP, MELD, Avance, PAT, and HIPPY--represent some of the oldest and most well-established programs in the family support field. For more than a decade, they have been delivering services that are intended to focus on the whole family, that aim to enable families to help themselves, and that encourage voluntary participation.

The programs' primary training goal is to prepare staff to implement individual program models. The training and the training materials are intended to convey the essential elements of the individual program; trainers are expected to model the program's philosophy and approach as well as to provide staff with the knowledge and skills they need to offer services.

Collectively, each of the programs begins with certain assumptions about family functioning. For the most part, these assumptions--that families have strengths, that families want and need support--are shared by all of the programs. Each of the programs, too, espouses similar approaches for working with families that are grounded in the notion of respect for individual strengths and a belief in the capacity of the family to determine its own growth. All of them aim

to support this growth by offering new information or developing relationships between staff and participants.

There are also some strong similarities in the nature of the training that each of the programs has developed. PAT, HIPPY, and PSP offer 30-hour, five-day preservice training. Avance's training program is two-and a-half days; MELD's is 20 hours over four days. In general, the programs rely on a staff-participant ratio of one to eight for group sizes that range from an average of 20 to more than 50. Trainers use a variety of teaching strategies, including lectures, site visits, small group discussions, and exercises.

***What Are the Differences in the Training Materials and the Training?***

Within this general framework of assumptions about families and the ways to work with them, there are some significant differences in the training offered by the five programs. While all of them articulate goals of supporting growth among family members, the specific goals vary. PAT, HIPPY, and Avance have, as primary goals, child and parent development. By contrast, PSP and MELD focus primarily on adult development, although MELD also aims to support the role of parents.

The programs propose different strategies for achieving these goals in their training materials. PSP and MELD stress group interaction, while PAT and HIPPY focus on work with individual families through home visits, with group meetings as a supplement. Avance follows another strategy. It relies primarily on formal classes for parents, and it uses home visits primarily for evaluation purposes.

The content of the training curricula reflects these differences. The emphasis on information about development, how to offer specific program services, and how to implement specific program procedures varies from curriculum to curriculum. PAT's and HIPPY's materials provide a great deal of information on child development, on how to conduct home visits and group meetings, and on how to operate the program. PSP emphasizes what it means to offer a PSP program and how to offer activities for adults and families, and it devotes less of the material in the curriculum to content about development or management issues. MELD's MYM

materials stress how to develop and organize groups; the content for the group meetings is presented in a separate curriculum. Avance's materials emphasize process, but they also provide information on program management.

There are also some significant differences in the way the programs address such issues as acknowledgment of cultural differences and the language that the training materials use to convey respect. PSP and Avance tend to be explicit about differences, especially about traditions, ethnicity, socioeconomic status, and language, while PAT and HIPPY seem, for the most part, to ignore or blur differences. MELD does not address this issue at all in its basic materials, opting instead for a separate curricula for staff who will work with different populations.

Of the five programs, MYM, PSP, and PAT are the most successful in using language that conveys the family support philosophy of mutually respectful, egalitarian relationships between staff and parents. HIPPY is somewhat uneven in this regard, and Avance tends toward a more didactic approach.

***What Issues Do These Findings Raise About Training by Individual Programs?***

***Preparing prospective staff from a variety of backgrounds to offer program services.*** Comparison of the training materials and the training offered by these five programs raises some interesting questions about individual program training. One of these issues is how individual programs respond to the needs of prospective staff with different backgrounds.

If these programs continue to expand, they may attract a more diverse population of prospective staff. Some individuals may have completed their undergraduate education, while others may only have a high school degree. HIPPY and MELD have already addressed this issue with a train-the-trainer model geared initially to individuals with college degrees who will train others who do not have advanced education. The other programs, however, have not yet confronted this issue in a systematic way. PAT's training is specifically designed for individuals with degrees in early childhood or related fields, while PSP and Avance intend to train staff with a variety of educational backgrounds.

The issue of training a broader population of staff is complicated. How can programs offer content information to staff who have different educational levels? What kinds of information do staff need about child, parent, or adult development to deliver programs services? How much information do staff need? How do programs balance staff's need for information with the need to understand how to deliver specific services and how to follow program procedures?

Education is only one of several training issues that programs may face. Another is language. Three of the programs in our study--MELD, Avance, and PAT--have prepared curriculum materials in languages other than English. Only two--PSP and MELD--offer training for non-English speakers. How will the programs deal with the potentially growing demand for training for people who do not use English at home?

A related question applies to training individuals who come from different cultural or ethnic backgrounds. The programs' current strategy is to use trainers who match the cultural backgrounds of their participants. This assumes that culture or ethnicity is the dominant issue and ignores questions of class, which may have an effect on the attitudes and experiences that participants bring to training.

***Responding to increased demand for training.*** Another issue that programs face is how to respond to an increased demand for training. For the most part, the programs in our study rely on a relatively small national staff of two to seven trainers, although HIPPY and PAT use trainers from local programs as well. In general, they offer training institutes twice a year. PAT is the exception with 66 institutes annually.

None of the programs is fully equipped to meet the need for rapid expansion because their infrastructure is designed for current needs. They lack trained staff, resources for materials, and systems for offering training to a significantly larger audience.

***Maintaining program quality.*** Equally important is the issue of maintaining quality. The programs in our study have developed different strategies to address this issue. PSP and MELD, and to a lesser degree, HIPPY, attempt to promote quality programs through a rigorous

application process for potential sites. In addition, MELD and PSP require local sites to work with their national staff for a two-year period. PAT attempts to ensure quality by requiring staff to maintain their PAT certification on an annual basis.

If there is wide interest by localities in using these models, the programs face the very real issue of a significant dilution of program quality. Their basic training is only 20 to 30 hours, a very brief period of time to prepare staff to use their models. Three programs continue to offer assistance after the initial training, but their support is limited. MELD and PSP offer phone consultations and annual site visits during a two year period. HIPPY sends out trainers from the national staff to work with the site coordinator during the training of the paraprofessionals and makes two site visits during the remainder of the year. The other two programs--PAT and Avance--do not provide even this level of support.

***What Lessons Can Be Learned From These Programs About Preparing Staff to Use the Family Support Approach?***

The extent to which the training offered by these five programs prepares staff to offer family support services is a reflection of the fit between the individual program models and the evolving definitions of family support rather than a deliberate effort to design family support training. This is an important distinction because it raises questions about training for specific family support models as opposed to generic family support training.

This issue is at the heart of the attempts to define family support. Is it an approach that is informed by a set of principles, or is it a set of program models that share some principles in common? If it is an approach, is there a single way to interpret and operationalize family support principles?

The commonalities in the training systems developed by the programs in our study seem to point to some sort of common competencies in family support. These include knowledge about family functioning, specifically child, adult, and parent development as well as information about group process. At the same time, they point to a common set of skills: how to build

mutually respectful relationships, create trust, focus on strengths, enable families to help themselves and how to facilitate groups and make home visits.

The notion of common competencies seems to point in the direction of generic training for family support rather than training for specific programs. This issue raises several questions. What knowledge and skills are basic to family support? What kinds of systems can prepare individuals to use this approach? How can these systems be developed?

If family support moves in the direction of generic training, its first challenge will be to reach a consensus about the knowledge and skills that constitute the family support approach. Several scholars, among them Norton (1994), Dunst (1994), and Dean (1994), have already begun to work in this area. Each has proposed a set of competencies that, while overlapping to some degree, reflect different perspectives. Norton draws on the field of social work; Dunst grounds his work in early intervention; and Dean relies on Cornell's empowerment approach.

The second challenge for the field will be to identify strategies for helping individuals to obtain these competencies. Two options seem feasible. One is to develop credentialing programs, and the other is to develop a system for preservice and inservice training.

Some efforts to create family support credentials are already underway. The State of Virginia, for example, has developed a family support credential for individuals who work in its Child Health Insurance Program; Oklahoma has created a credentialing program for professionals who work with families and children; Minnesota has a well-established certification program for staff who work in its Early Childhood Family Education (ECFE) Program. New York State is planning to develop a family support credential modeled on the one used in Iowa, which is designed to recognize the competencies of front-line workers.

Credentialing systems represent one way to promote professional practice in the field. But there are some risks inherent in this approach. The experience of the early childhood field points to some of these problems. In the 1970's, the field created a Child Development Associate (CDA) credential, which was based on a set of competencies that could be acquired through a program of course work and field experience. The CDA was intended as an option for individuals who had not completed formal training in early childhood education to enable them

to obtain higher paying jobs in the field. Unfortunately, these expectations were not fulfilled. In many areas, acquisition of the credential did not lead to a better job, better pay, or even credit that would be accepted for an associate degree.

To avoid repeating this situation, it would seem that any credentialing system in family support should be tied to academic or career advancement. This raises another issue. In family support, unlike early childhood, there are as yet no clear career paths or even, to some extent, job descriptions. Individuals who aim to work in the early childhood field can look towards teaching in a center or a home-based program, with an eye towards directing such services. This is not the case in family support where individuals can, and do, perform many different kinds of functions with families and children in a wide variety of settings.

In large part the absence of clearly defined employment opportunities associated with family support is related to its current struggle with identity. It is likely that this situation may not change, if family support adopts the position that it is an approach that can be infused in a broad range of services. The result may be that there are general employment opportunities for individuals who can use the approach rather than specific jobs for "family support workers."

Such a scenario points to the advantages of the second strategy for training individuals, academic preservice and inservice preparation. Two alternatives seem to be possible. One would be to develop a separate and distinctive discipline for family support. The other would be to develop family support specializations within existing disciplines such as early childhood, social work, and health.

Of the two, the latter seems to be more promising. Our analysis of the training offered by the programs in our study, and a review of the family support competencies proposed by others, points to a common body of knowledge that is embedded in existing disciplines. Creating a family support specialization within these fields would seem to be both practical and reasonable. It would rely on existing systems for academic and career preparation, while providing an opportunity for individuals to acquire the skills and knowledge that are distinctive to family support.

There is another compelling argument for this strategy. In the current fiscal climate, it is likely that employment opportunities in social services may shrink rather than expand. If this is the case, it will be important to ensure that staff can offer high quality services. Solid preparation may be a crucial factor in this outcome.

What are the implications of this discussion for the field? Clearly, family support must define itself. In addition, it must tackle the challenge of reaching agreement on the body of knowledge and skills that are essential for practice. The next step must consist of developing both short-term and long-term plans for creating a system that would prepare individuals to use these competencies. Among the issues that should be considered in this planning process are the role of specific programs that currently offer training, the creation of a rational system of preservice and inservice training that is tied to academic and career advancement, and strategies for financing these efforts.

## Appendix A

### *Family support training curricula*

*Avance training manual, vol. 3, no. 1.* (1993). San Antonio, TX: Avance.

*Home Instruction Program for Preschool Youngsters: HIPPY USA.* (undated). New York: HIPPY USA.

MELD. (1985). *MYM training manual.* Minneapolis, MN: Author.

Missouri Department of Elementary and Secondary Education, Parents as Teachers National Center. (1990). *Program planning and implementation guide* (rev. ed.). St. Louis, MO: Author.

Parent Services Project. (1994). *Replicating the model.* Fairfax, CA: Author.

## Appendix B
### *Program Profiles*

***PSP: Parent Services Project, Inc.***

***Overview.*** Parent Services Project, Inc. (PSP) was formulated as an innovative prevention program that would be regional, culturally diverse, and flexible. It aimed to expand the role of child care centers into family care centers by integrating a family support approach. PSP believes in working with parents in a partnership on behalf of their children. Three hundred PSP programs in the United States serve over 15,000 families. There are currently 28 sites in the San Francisco Bay Area and others in California, Georgia, Delaware, Florida and Mississippi. The coordinating office operates in Fairfax, California.

***History.*** PSP was initiated in 1980. The program was funded collaboratively by the Zellerbach Family Fund and the San Francisco Foundation Beryl Buck Trust, with the intention of creating a program to strengthen families. The initial four PSP sites were established in the San Francisco Bay Area in 1981, and served 400 families in three counties. Within two years, four more sites were added, serving a total of 700 families. In 1988, PSP incorporated to provide training, to disseminate information on the model by presenting at conferences and forums, and to effect public and institutional policies.

***Target population.*** PSP serves families with urban, suburban, and rural lifestyles. Participants include African Americans, Latinos, Chinese, Southeast Asians, and Caucasians. As population shifts occur, PSP centers increasingly enroll Haitians, Ethiopians, and other newly arrived groups. PSP also serves parents employed in small businesses, migrant farm workers, and teen mothers. Most early childhood programs that employ the PSP model serve families with low to moderate incomes.

***Program purpose/goals.*** Through creating a community and a sense of belonging, PSP hopes to diminish isolation and build on the strengths of its participants. It also seeks to enhance the parenting roles of its participants and to assist parents in securing needed resources for themselves and their children. Goals of the PSP program include offering services that help parents raise their self-esteem, creating systems of social support for families through family events and activities, and providing opportunities to develop leadership and excellence.

***Program structure.*** Sites that use PSP are operated independently from the PSP organization. Staff are encouraged to adapt the model to their own programmatic and community

needs. Key to the model is the Parent Leadership Committee which is responsible for assessing the needs of parents and the community. Their information becomes the basis of PSP program planning and implementation. PSP offers individualized child and family development services for each family in the program. Program components include family development services; family management skill classes; teen parent services and home-based programming; parenting classes; sick-child care and respite care; job training and skill development; peer support groups; adult-only activities; mental health workshops; family day care coordinator training; "Family Fun" activities and outings; information and referral services; men-focused and men-determined services; and the "Parent Options Fund" for parent-determined expenditures.

PSP sites originally operate as early childhood care and education programs before adopting the PSP model, and all program staff and PSP staff work together closely. PSP and program staff see parents every day when they drop off or pick up their children, and they use this contact to give parents information and support. Over time, trust and respect develop. This daily contact enables PSP staff to identify potential family difficulties in the early stages and to work with parents to address any concerns.

***Staff.*** Each PSP agency employs staff consistent with its own ethnic population and organizational structure. Some agencies have employed professional family services coordinators, while others have added this responsibility to existing staff. Staff can include paraprofessional, volunteer, and graduate-level personnel.

***Training.*** PSP offers a five-day training in California or at the program site. Topics include the principles and theoretical foundations of the PSP model, as well as workshops on working with families, cultural awareness, dealing with hard issues, governance and planning budgets, and developing private and public partnerships. Trainees in California visit three PSP sites and meet with staff and parents to learn about implementation issues directly from people working in the programs.

***Quality control.*** PSP conducts extensive follow-up at all sites for two years after the initial training. These visits include observation of parent groups and staff and on-site training. In addition, it offers refresher sessions and phone consultations. Following the first year, PSP makes two additional visits to new sites. Coalitions that meet six times a year are the vehicle for maintaining connections. Alternative months often include mini-training on subjects of interest that are defined by the coalition.

***Funding.*** Nationwide, PSP programs rely on private and federal grants, such as Head Start and drug and alcohol funding, foundation support, and other funding. The unit cost is $350

to $400 per family annually, although many programs attempt to raise funds to support additional expenses.

***Evaluation.*** Quantitative evaluation reports are prepared annually. In 1985, the URSA Institute, a California consulting group, conducted a cost-effectiveness study. It determined that PSP services saved public dollars and was cost-effective.

In 1988, Alan Stein and Associates completed a full evaluation of PSP. The three-year longitudinal study surveyed parents in all eight Bay Area centers before, during, and after program participation. Results showed that PSP was achieving its goal: PSP parents and families experienced reduced symptoms of stress and isolation. In addition, they felt more empowered and demonstrated healthier family functioning.

PSP's training techniques were evaluated in 1989-90 by Molly Haggard, an independent consultant. Her evaluation concluded that PSP's flexibility in dealing with diverse populations contributed to the increase in parent attendance and resources.

## *MELD*

***Overview.*** MELD was established in the context of a grant to study ways to strengthen families. Created in response to trends of higher family mobility, a decreasing number of families who lived near extended family members, increasing divorce rates and numbers of single parents, increasing substance abuse, and increasing child and/or spouse abuse, it aimed to give first-time parents information and support, using the peer self-help approach.

The program and its curriculum materials have been adapted to meet the needs of various socioeconomic groups. MELD replicates its programs through training and certification of site coordinators. Since the late 1970's, more than 100 agencies have replicated the model. Currently, more than 70 programs exist across the country in 23 states. Each year, MELD serves more than 5,000 parents.

MELD's mission is to strengthen families who are experiencing difficult transition periods. It brings together parents who have similar needs, provides them with pertinent information, and helps them create peer groups.

***History.*** Primary development began in 1973. The initial research grant was provided by Lilly Endowment, Inc., with additional funding from the Bush, Mardag, and Ripley foundations. The grant was awarded to Ann Ellwood, MELD's Executive Director, who, with consultants, reviewed literature, surveyed needs, and assessed resources related to young children, parenting, and early learning.

MELD operated as a pilot program from 1975 to 1978 in Minneapolis, Minnesota. It consisted of five parent groups and 89 parents. In 1978, the MELD program was adapted to meet the needs of adolescent mothers, and, with funding from the Carnegie Corporation, MELD's Young Moms (MYM) was created. The first two MYM groups began in May and July of 1979.

***Target population.*** MELD offers a variety of programs to meet the needs of diverse families. Among them are programs to meet the needs of young mothers and young fathers (MELD for New Parents); Latino parents (MELD para La Nueva Familia); parents of children with special needs (MELD Special); parents who are deaf; and Southeast Asian Hmong parents. All of MELD's programs for adult parents serve both single parents and couples. Forty percent of MELD's adult parent group participants are fathers.

***Program purpose/goals.*** MELD seeks to educate and support parents through long-term information and support groups. The program's goals include helping parents to become more self-assured as parents, to promote family wellness, and to combat child abuse. More specifically, MELD aims to improve parents' knowledge about meeting the emotional and physical needs of

children, to help parents cope with issues of personal development while raising children, and to decrease familial isolation. Specific program outcome goals are stated in each program's evaluation manual.

***Program structure.*** MELD parent groups, led by volunteers, are held weekly or biweekly for two years in various community settings. The MELD curriculum is divided into four successive phases. It covers issues related to health, child development, child guidance, family management, and parental growth; parents choose the topics. Each group meets in ten-week phases with breaks between each phase. MELD's philosophy is that "we can support each other; we can learn from each other; we can cooperate with each other while maintaining our individuality; we can make informed decisions." (See Appendix A for references to the training curricula that were studied.)

***Staff.*** The MELD Site Coordinator manages the implementation, maintenance and evaluation of a MELD program. The Coordinator's qualifications include knowledge of a field such as social work, psychology, family social science, child development education or health; a minimum of two years work experience in programs working with families; experience working with the culture or population served by the program; experience supervising personnel or volunteers; experience with public speaking; experience as a volunteer and knowledge of community leaders and programs.

The Site Coordinator is responsible for recruitment, training and supervision of parent group facilitators (PGFs). PGFs are community-based volunteers who work in teams with the groups. A key criterion for MELD facilitators is that they have experienced the specific parenting circumstances of the people who will be in their groups. For example, MELD for Young Moms (MYM) facilitators must have at one time been single teen mothers; MELD Special facilitators must themselves be parents of disabled or chronically ill children.

Specific professional or educational backgrounds are not required. MELD seeks people who enjoy being parents and who are interested in learning how to facilitate groups with the MELD model and curriculum.

***Training.*** MELD offers a 40-hour, five-day training workshop in Minneapolis for site coordinators. A 20-hour four-day training is offered at the site to parent group facilitators.

***Quality control.*** MELD typically negotiates a two-year contract with programs that seek to replicate the model. In addition to the initial five-day training, the contract includes a five-day site visit by MELD staff to the new site and a total of 18 consultations. During the first year, MELD staff offers these consultations monthly; ten hours of consultation and a seminar are

offered in the second year. Programs are certified as MELD replication sites after the first year. Replacement staff may be trained free of charge during the first year.

***Funding.*** Replication of the MELD program has been funded by various private sources, including the Carnegie, Bush, Dayton-Hudson, Bremer, Robert Wood Johnson and Hasbro Children's Fund for the *MYM Training Manual.* Federal, state, county and city governments represent other funding sources. Additional support is provided by corporations and foundations.

***Evaluation.*** MELD's initial priority was service delivery rather than measurement of outcomes. During its pilot years, formative evaluations resulted in almost continual changes in the program, and MELD refined its mission, goals, and objectives several times. Since the 1970's, several formal evaluations have been conducted. In 1980, Reineke and Benson conducted a comprehensive evaluation that included pre- and post-test questionnaires for participants, observation of MELD groups, evaluation rating schedules, and interviews with the PGFs. Of the nine existing MELD sites, four were chosen for the evaluation. The study concluded that parenting information and support were communicated at a high rate.

In 1985, the Bush Foundation funded a four-year longitudinal study of MELD's effects on its participants. The project was directed by Douglas Powell of Purdue University. It examined coping and stress, parent-child relations, marital relations, and personal well-being.

Three groups were tested. One did not participate in a MELD group or receive written information; a second received only written information; the third received written information and participated in group discussions. The study demonstrated that the amount of support among MELD parents was high, and that much of this support came directly from the group. The MELD program group was the only one of the three that demonstrated a statistically significant increase in child development knowledge.

The MELD Young Moms (MYM) program was evaluated with a grant from the Ford Foundation in the mid-1980's. Results indicated that in their first year of participation, 80% of MYM moms continued or finished high school. It also found that the MYM moms had a 10% to 15% second pregnancy rate compared to a 25% rate among the control group, and that MYM moms made better use of community resources than the control group.

MELD is currently conducting a study of eight long-standing programs in urban, suburban and rural areas as well as in various cultural settings. The study is designed to examine program effects on reduction of isolation, knowledge of child development and nurturing behaviors, personal development, school and pregnancy rates.

***Avance Family Support And Education Program***

***Overview.*** The Avance Family Support and Education Program was created as one of the first family support and education programs in the United States and one of the first comprehensive community-based family support and education programs to target Hispanic populations. Avance, which means "advancement" or "progress" in Spanish, annually serves approximately 5,500 adults and children. In San Antonio, it operates in seven centers, nine schools, and eight workshop sites. In Houston, there are three mobile centers, one community center, and five schools. The Rio Grande Valley Area chapter, added in 1992, operates out of four mobile centers. Avance first focused on preventing academic failure, but the program has grown to respond to the interrelated needs of families including child abuse prevention, economic development, and the development of parents' self-esteem.

***History.*** Avance was established in Dallas, Texas in 1972. The San Antonio chapter was founded in 1973, and the Dallas chapter phased out in 1975. The idea for Avance grew out of work by graduate students of Dr. Urie Bronfenbrenner at Cornell University. Initially funded by the Zale Foundation as a not-for-profit, community-based organization directed by Gloria Rodriguez, its current Executive Director, it served 35 parents. The National Training Center was established in 1988.

***Target population.*** Avance targets Hispanic populations. Participants come from low-income, mostly Mexican American families living in or adjacent to federally funded housing projects in urban and rural settings. Program participants have an average income of $6,840, an average educational level of ninth grade, and children under age four; in 1988, 30% of participants were single mothers. Eighty percent of Avance parents are high school drop-outs who have no marketable job skills. Families have lived in poverty for several generations, lack knowledge of child growth and development, and live with a high degree of stress and isolation.

***Program purpose/goals.*** Avance's objective is to create strong families by offering specialized training, social support services, and adult basic and higher education. It seeks to improve and add to parental knowledge, attitudes, and skills in the growth and development of children beginning prenatally. By strengthening the home, school, and parent relationship, Avance hopes to reduce the probability of a child's early school leaving.

Avance's goals also include strengthening support systems that will alleviate problems and remove obstacles that impede effective parenting and involving parents in the prevention of problems such as learning delays, child abuse and neglect, academic failure, teen pregnancy, and substance abuse.

***Program structure.*** Avance's primary component is the Parent-Child Education Program, a nine-month parent education program that consists of several elements. These include parent education classes that cover a range of topics, regularly scheduled workshops with speakers, and hands-on activities such as toy making. The program also includes biweekly home visits, an early childhood education program for young children, and special family events. Avance offers linkages to high school equivalency degree programs and support for parents who seek employment. It also provides transportation for families who participate in the program.

In addition, Avance offers services that build on its basic programs through several federally funded demonstration efforts. Among them are a Comprehensive Child Development Program, a five-year intervention to support low-income mothers who are pregnant or who have a child less than a year old; Even Start, a family literacy program for low-income families who have not completed high school; and the Chronic Neglect Project, which offers intensive home-based services to families who are at risk of child abuse or neglect.

***Staff.*** Avance has a staff of 117. Approximately 75 per cent are graduates of the program, and all staff members are bilingual. Several volunteers also serve the program.

***Training.*** The Avance-Hasbro National Family Resource Center focuses on developing and disseminating materials and training that address the needs of high-risk families. The Center conducts two-and-a-half-day institutes. The Avance Parent Education Curriculum is available for purchase upon completing the Avance Institute.

***Funding.*** Avance's annual budget is derived from a variety of funding sources. Approximately 30% of its funding is federal, 20% private foundation, 16% contracted services, 10% local government, 7% United Way, 6% fundraising events, 3% corporate donations, and 1% certified programs.

***Evaluation.*** The Carnegie Corporation funded a three-and-a-half-year evaluation that included an impact study, a process and treatment study, a participant profile study, and a follow-up study. Two large annual cohorts were followed for two years at two program sites. Control groups were randomly assigned at one site and matched at the second. Variables included maternal knowledge, behavior, attitudes, and continuing education after completing the nine-month program and after the following twelve months.

The evaluation pointed to the effectiveness of the program. Pre- and post-test results confirmed that Avance mothers increased their knowledge about their children's social, emotional, cognitive, health, and growth and development needs. Comparisons between the cohorts revealed

that mothers who participated in Avance provided a more organized, stimulating, and responsive home environment, provided more developmentally appropriate toys, were more positive in interacting with the child, initiated more social interactions with the child, used more praise with the child, spent more time teaching and talking with the child, and were more encouraging of child verbalizations. Program mothers reported a more nurturing attitude toward their child, more opposition to physical punishment, an enhanced view of self as child's teacher, increased sense of parental efficacy, increased parental knowledge and skills, increased knowledge and use of community resources, and increased knowledge of contraceptive methods.

After graduating from Avance, a significant proportion of the Parent Education Program participants enrolled in continuing education classes. Social services agencies reported that after program participation, parents were more hopeful about the future, more willing to receive help, and less severe in their punishment.

Evaluation results regarding mother-child dynamic behaviors indicated that Avance mother and child interaction was marked by mutual enjoyment of activities, participation in joint activities, and mutual responsiveness and turn-taking.

***PAT: Parents As Teachers***

***Overview.*** Parents as Teachers (PAT) is designed to provide parents of children from birth to age three and from three to five with the information and support needed to give children the best possible start in life. PAT believes that the parent is the child's first and most influential teacher, and that experiences in the child's early life are a key part of the foundation for success in school and in life. A combined total of approximately 1,450 PAT programs have been implemented in 44 states, the District of Columbia, Australia, England, New Zealand and St. Lucia. In 1993-1994, PAT programs in 536 Missouri school districts served 124,236 families and screened 121,619 children.

***History.*** PAT was founded in 1981 in Missouri as NPAT, or New Parents As Teachers. The idea originated in two Missouri conferences on early childhood and parenting education convened by the State Department of Education in 1975 and 1981. The program was adapted by Mildred Winter, the current Executive Director, from the parent education model developed by Burton White. Funded by Missouri's State Department of Education, the Danforth Foundation of St. Louis, and four local school districts, and located in urban, suburban, and rural communities in Missouri, the NPAT pilot began with 380 families who expected their first child between December, 1981 and September, 1982.

Statewide implementation began in 1985-1986, providing services to 10% of families with children under age three. Because the service was no longer restricted to first-time parents, the word "New" was dropped from the program's name. The Missouri General Assembly passed the Early Childhood Development Act in 1984, mandating parent education from birth to kindergarten entry and the screening of children in all of Missouri's school districts. In 1987, the Department of Education established the Parents As Teachers National Center, which provides training, research, curriculum development, and promotion of public policy that supports early childhood education.

***Target population.*** PAT serves parents of all ages, ethnic backgrounds, and socioeconomic and educational levels. As a result of its policy of universal access, participants represent a mix of families.

***Program purpose/goals.*** PAT aims to empower parents to give children the best start in life, to increase parents' feelings of confidence and competence, and to improve parent-child interaction and family well-being. PAT's goals are to help each child reach his/her full potential; to increase parents' knowledge of child development and appropriate ways to stimulate children's curiosity, language, social, and motor development; and to increase children's success and parents'

involvement in school. PAT also seeks to support cognitive, language, and social development of children and to identify developmental delays and handicapping conditions at the earliest possible age.

***Program structure.*** Home visits are the core of the PAT program. The frequency of the visits depends on individual families' needs and desires. During the three-year Birth to Three program, PAT parent educators strive to help parents understand their child's development and to guide their interactions with the child in ways that enrich the child's achievements and strengthen the parent-child relationship. PAT also screens children to check language skills, hearing, vision, and overall development in order to detect potential problems early as well as to promote parents' attention to health and development.

Curriculum begins prenatally and is organized by developmental stages. Parent educators are trained to adopt a "whatever it takes" attitude toward supporting families and to address particular family needs and to make relevant referrals. At the group meetings that supplement home visits, parents share experiences, successes, and common concerns. In addition, they participate in parent-child activities and learn about community resources. Many sites offer toy, book, and video resource centers.

***Staff.*** Parent educators are women and men who have backgrounds in early childhood education, child development, nursing or social work. The PAT National Center trains and certifies them. PAT recommends that parent educators have degrees in early childhood education, but program and community circumstances may dictate otherwise. Regardless of their academic backgrounds, all parent educators are expected to have had supervised experience in working with young children. Each sponsoring agency selects prospective educators to receive training. Most Missouri school districts employ degreed people as parent educators and prefer that they be parents.

***Training.*** The PAT National Center offers a variety of seminars and institutes to prepare staff and administrators. The "Right Choice" seminar, for example is designed for administrators who are interested in the PAT model. It is offered in conjunction with the three basic PAT Implementation Institutes for individuals who intend to implement the Birth to Three PAT program. Ranging from 30 to 31 hours over a five-day period, these institutes include: the Implementation Institute Birth to Three, Parents as Teachers for Adolescent Parents, and Parents as Teachers in the Child Care Center. The PAT National Center also offers a two-day, 14-hour institute on extending PAT programs to include ages three to five.

In addition to these institutes, the National Center offers a wide variety of specialized training. Among them are 31-hour, five-day institutes for implementing PAT in Even Start

programs, 31-hour, five-day institutes for implementing PAT in Head Start programs, and a two-day institute on working with families through home visits.

***Quality control.*** Each PAT program has an advisory board or steering committee whose members represent agencies and organizations that serve young children. This board works with staff to plan, implement, and continually adjust and improve service delivery.

The Missouri State Board of Education sets specific standards for local program operations and parent educators. Other states that have a significant number of PAT programs set similar standards.

The PAT National Center has developed program quality assurance procedures that involve program self-evaluation followed by outside observation and assessment. All parent educators are credentialed by PAT annually, based on satisfactory performance in an approved PAT program and completion of the required number of inservice training hours.

***Funding.*** In Missouri, PAT programs are funded primarily by the State Department of Elementary and Secondary Education, supplemented by local school districts. Nationally, funding includes a mix of private and public dollars, including Head Start and Even Start. Average costs are $580 per family annually.

***Evaluation.*** The Research Training Associates of Overland Park, Kansas, conducted evaluations in 1985, 1989, and 1991 under contract with the Missouri Department of Elementary and Secondary Education. In the 1985 study, a treatment/comparison group design was used to determine program effectiveness, using post-tests of children's abilities and assessments of parents' knowledge and perceptions. The evaluation sample consisted of 75 randomly selected project children and, from the same communities, 75 comparison children. All children were evaluated within two weeks of their third birthdays. Traditional ANCOVA and LISREL analyses of covariance were used to adjust for differences between the two samples.

The study used the Kaufman Assessment Battery for Children to measure cognitive levels and the Zimmerman Preschool Language Scale to assess children's understanding and use of language. Parents rated their children's social development using selected and adapted items from the "personal-social" domain of the Battelle Development Inventory. Psychometrists rated selected aspects of the children's social development at the time of testing. Parents were given knowledge questionnaires to determine their understanding of child development and appropriate childrearing practices.

Results indicated that at age three, children who had participated in PAT were significantly more advanced than comparison children in language development, significantly ahead of peers in problem-solving and other intellectual abilities, and significantly advanced over

comparison children in demonstrating coping skills and positive relationship with adults. Characteristics of risk, including parents' age, education, income, and single-parent status, had no relationship with project children's achievement. Parents' perceptions of themselves and their school district were affected positively by program participation.

The 1989 follow-up study tracked the achievement of project and comparison group children through first grade in Missouri public and private schools. PAT program children scored significantly higher than comparison children on standardized measures of reading and math achievement in first grade. Reports from teachers rated PAT children higher than comparison children in all areas evaluated. A significantly higher proportion of PAT parents initiated contacts with teachers and took an active role in their child's education.

A Second Wave Evaluation Study, started in 1986-87, was designed to investigate PAT's impact on varied types of families enrolled in 37 diverse school districts across Missouri. This study, completed in 1991, evaluated 400 randomly selected families of varied residence, marital status, income level, education, and ethnicity. Results indicated that both parents and children continued to benefit from the PAT program. Despite the fact that the study's sample was over-represented on all traditional characteristics of risk, PAT children scored significantly higher than normal on measures of intellectual and language abilities. Families became more knowledgeable about child development and childrearing practices, and parent-child communications were improved. During the three-year study only two cases of child abuse were documented.

Recent studies in other states continue to demonstrate PAT's effectiveness. A study conducted by the Parkway School District in metropolitan St. Louis for example, showed that third graders who had participated in PAT scored significantly higher on standardized measures of achievement than other children who had not participated in the program. Another study of PAT kindergarten children in 22 rural school districts indicated that PAT children scored higher in number concepts, and auditory, language and motor skills.

***HIPPY: Home Instruction Program for Preschool Youngsters***

***Overview.*** The Home Instruction Program for Preschool Youngsters (HIPPY) is a home visiting program that encourages economically or educationally disadvantaged parents to teach their children school readiness at home and to continue their own education. In 1993-1994, 83 HIPPY sites in 23 states served more than 11,000 families. Each local HIPPY program is sponsored by a local agency that contracts with HIPPY USA. In Arkansas, HIPPY is a statewide program sponsored by the Arkansas Early Childhood Commission. It consists of more than 30 sites that serve approximately 5,112 children and their parents.

***History.*** HIPPY was founded in 1969 as a research and development project of the National Council of Jewish Women's (NCJW) Research Institute for Innovative Education at Hebrew University, which was directed by Dr. Avima Lombard. Its purpose was to help poor immigrant children from Africa and Asia prepare for the Israeli educational system. The pilot program was adopted in 1975 by Israel's Ministry of Education and Culture as part of the national education welfare program.

In 1980, the Research Institute sponsored a HIPPY seminar that was attended by early childhood development and education experts from many countries. The seminar generated the notion that HIPPY could be implemented in a variety of settings around the world. HIPPY began in the United States in 1984, when the first US HIPPY program was established in Tulsa, Oklahoma.

In early 1986, Hillary Clinton brought HIPPY to the attention of educators in Arkansas by organizing a statewide conference on preschool programs. Four HIPPY programs--two in urban areas operated by local school districts, and two in rural areas operated by private, non-profit groups--represented the first efforts in the Arkansas statewide program. The NCJW continued to sponsor HIPPY until 1991, when it became independent as HIPPY USA, a not-for-profit educational corporation. It is currently based at Teachers College, Columbia University, in New York City.

***Target population.*** HIPPY aims to serve families in low-income areas and families with educationally disadvantaged parents. Families have children four to five years of age; many children are in preschool programs. HIPPY families may have teen parents, histories of abuse or neglect, substance abuse problems, Chapter I eligibility, or developmentally delayed children.

***Program purpose/goals.*** HIPPY seeks to encourage economically or educationally disadvantaged parents to teach their own children school readiness at home. HIPPY's goals are to encourage parents to become involved in the education of their children; to improve

communication skills between parents and children; to establish consistency in teaching children at home; to offer ongoing motivational strategies to enhance educational performance; and to encourage parents to enroll in continuing education programs. The program also seeks to help local communities by providing jobs to parents as paraprofessionals and by increasing the self-esteem of participants.

***Program structure.*** HIPPY is a two-year program that operates 30 weeks annually. It consists of home-based visits every other week when paraprofessional "parent partners" work with parents on activity packets that parents complete with their children on a daily basis (15-20 minutes per day). The program consists of lessons that focus on school readiness and cognitive skills, including visual and auditory discrimination, spatial perception, pre-math concepts, self-concept, creativity, and logical thinking. The materials include 18 storybooks, 60 activity packets, and a set of 16 plastic shapes. Parents meet biweekly for discussion and role-play.

HIPPY USA requires each program to conduct a needs assessment of the community. Each local HIPPY program has an advisory council with representatives from the target community, local human service agencies, schools, volunteer organizations, Head Start staff, government officials, and funders.

***Staff.*** A full-time site coordinator is hired locally; he/she must be a professional with a background in early childhood education, social work, community work or adult education. Part-time paraprofessionals are hired from the target community. They must be current or former program participants and they must be literate. HIPPY believes that paraprofessionals can create a bond with the participating family by being in or having graduated from the HIPPY program.

Primary responsibility for program delivery lies with the paraprofessionals who serve as home visitors. Du[illegible]g the home visit, they are expected to review activity packets of the previous week, instruct the parent on upcoming material, and discuss any problems that arose with the parent while working with the child. The paraprofessional then passes these concerns on to the coordinator for further discussion.

***Training.*** Local coordinators attend a week-long preservice training. Following the preservice training, HIPPY USA conducts two site visits per year to offer inservice training to the local coordinators. HIPPY USA also helps to train paraprofessionals and is available by telephone for technical assistance, trouble-shooting, and conflict resolution. Site coordinators directly supervise the paraprofessional "parent partners" and develop and implement staff training.

***Quality control.*** HIPPY USA requires all local programs to use its Management Information System, a computer program that records information on program participants and tracks progress. It uses the semiannual site visits to insure quality.

***Funding.*** Federal grants, including some Chapter I funds and Even Start, and state funding along with foundation funding, are used to support program sites. In 1991, the Arkansas Better Chance Bill represented most of Arkansas's funding. Local program costs are approximately $1000 per family annually.

***Evaluation.*** In 1991, HIPPY USA began evaluation studies in sites all over the country. In addition, the United States Department of Education and the NCJW Center for the Child are conducting a three-year summative/quantitative study that is designed to evaluate outcomes, implementation, parent-child relations, self-sufficiency, and child school performance in three school-based HIPPY programs.

In Israel, the original group of 140 students has been followed to 12th grade. Results show that HIPPY participants are more likely to stay in school and less likely to be retained in grade than other children. The HIPPY children also demonstrated more positive academic achievement.

## References

Brookfield, S. D. (1990). *Understanding and facilitating adult learning.* San Francisco: Jossey-Bass.

Cochran, M. (1988). Parental empowerment in family matters: Lessons learned from a research program. In D. R. Powell (Ed.), *Parent education as early childhood intervention: Emerging directions in theory, research and practice* (pp. 23-50). Norwood, NJ: Ablex.

Cochran, M. (1994, May). Keynote address presented at the meeting of the Family Resource Coalition of New York, Syracuse.

Dean, C. & Diehl, D. (1994). *New York State Family Development Credential: Report on review of five potential "building block" staff training programs.* Ithaca, NY: Department of Human Development and Family Studies, New York State College of Human Ecology, Cornell University

Derman-Sparks, L. & A.B.C. Task Force. (1989). *Anti-bias curriculum: Tools for empowering young children.* Washington, DC: National Association for the Education of Young Children.

Dunst, C. (1994). *Key characteristics and features of community-based family support programs.* Pittsburgh, PA: Department of Psychiatry, Medical College of Pennsylvania and Hahnemann University, and Child and Family Studies Program, Allegheny-Singer Research Institute.

Modigliani, K. (1991). *Training programs for family child care providers: An analysis of ten curricula.* Boston: Wheelock College Family Child Care Project.

Norton, D. G. (1994). Education for professionals in family support. In S. L. Kagan and B. Weissbourd (Eds.), *Putting families first: America's family support movement and the challenge of change* (pp. 401-440). San Francisco: Jossey-Bass.

Powell, D. (1993). Inside home visiting programs. In Behrman, R. E. (Ed.), *The future of children , Vol. 3, No. 3* (pp. 23-38). Los Angeles: Center for the Future of Children, The David and Lucile Packard Foundation.

U. S. Department of Health and Human Services, Administration for Children and Families. (1994). *Request for proposals for national evaluation of family support programs* (RFP No. 105-94-1925; OMB No. 0990-0115). Washington, DC.

BEST COPY AVAILABLE